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REPUBLIC OF THE PHILIPPINES pine Health Insurance Corporation

709 CityState Center Bldg. Shaw Blvd. Brgy. Oranbo, Pasig City Telefax No. 637-3158

PURCHASE ORDER

PRID-PS-07

Please deliver to this office within		hin15 working o	Office Order No. 0161, s. 2	
			and the second s	Local Shopping
		PHILHEALTH	Date: Term of Payment: Mode of Procurement:	On Account
rei.Fax No.	725-3203 / 725-9964 / 726-441 / Telefox No. 725 (77)			July 22, 2013
	ZZZ-u Gen. Kalentong,	Mandaluvong City	1.0 110	07-062-13
Supplier	SHOJIKI BUILDERS	& INDUSTRIAL MARKETING		

15 working days

NO.	QTY	UNIT	from receipt hereof the	eceipt hereof the following	
,			ITEM DESCRIPTION UNIT	TOTAL	
1	154	pcs	ERASER, RUBBER, STEADTLER PRICE	AMOUNT	
2	223	pcs	FOLDER, PLASTIC, LEGAL 40.00	6,160.00	
			5.75	1,282.25	
			LESS:	7,442.25	
			EWT 1% 66.45		
			GMP 5% 332.24	398,69	
			RIV# received: 0.7-3.7.3	7,043.56	
	onditions		13-0159 dtd. 03/08/13 PRSMD - Ely E. Roxas		

- 1. The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered
- 2. If the date of receipt of the Purchase Order / P.O. by the dealer is not indicated, it shall be deemed received on the day it was acknowledge to have been received by a representative either through fax or e-mail
- 3. Delivery of the above item(s) shall be made within the prescribed schedule dates. Supplier are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall only be from 09:00 to 11:30 a.m. and 1:30 to 3:00 p.m. during Mon/Wed/Fri (MWF). All item(s) shall be delivered and accepted by the Procurement Section at 15th Floor, Room
- 4. Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- 5. Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery. With provision for a back-up unit in case of repair.
- 6. Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of 7. Warranty of three (3) months on hidden defects

Very truly yours,

	CRISTINA G. MONSALUD
Certified Budget Available: Funds Available in the amount of: Php.7.442.25	AO III-OIC, Exocurement Section
CORAZON M. TABULAO Fiscal Controller III Fiscal Controller III Fiscal Controller III	APPROVED:
Within the COB: **Expense Code: ** **TVO 13** **Expense Code: **TVV 10 1/1/10: Whealt of the code of	CHERIE CARMEN B. DIVINA Division/Chief, PRSMD HEAD OF THE AGENCY or Authorized Representative
ONFORME: ELVETO MILLAROVE-STEEP Signature over Printed Name and Position of authorized representative	Received copy of P.O.: