

REPUBLIC OF THE PHILIPPINES
Health Insurance Corporation
709 CityState Center Bldg.
Shaw Blvd. Brgy. Oranbo, Pasig City
Telefax No. 637-3158

PRID-PS-07

PURCHASE ORDER

Supplier: COPYLANDIA OFFICE SYSTEMS CORPORATION P.O No.: 07-063-13
Address: Copylandia Corporate Center 718 Bumatay St., Mandaluyong City Date: July 23, 2013
Tel.Fax No. 535-8535, Fax No. 7476222 Term of Payment: On Account
Supplier Registered with: PHILHEALTH Mode of Procurement: Small Value Procurement

Office Order No. 0161, s. 2012

Please deliver to this office within 20 working days from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	1	unit	BINDING MACHINE, A3 SIZE Brand/Model: IBICO IBIMASTER	45,000.00	45,000.00
2	1	unit	PAPER SHREDDER, HEAVY DUTY Brand/Model: HSM SECURIO B34 NOTE: One (1) Year Warranty on parts and service	56,000.00	56,000.00
LESS:					101,000.00
EWT 1% 901.79					5,410.72
GMP 5% 4,508.93					95,589.28
RIV # received: 07-391					
13-0367 dtd. 06/18/13 PRSM - Emily D. Briones					

Terms & Conditions:

- The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
- 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
- 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 1503 Citystate Ctr. Bldg. Pasig City
- Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- 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.
- Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report

Very truly yours,

CRISTINA G. MONSALUD

AO III-OIC, Procurement Section

Certified Budget Available: <i>for: 2013</i> EDITHA O. RAMASTA Fiscal Controller IV <i>for</i>	Funds Available in the amount of: Php101,000.00 <i>7/24/13</i> WILLIE M. BUMACOD Fiscal Controller IV	APPROVED: CHERIE CARMEN B. DIVINA Division Chief, PRSM HEAD OF THE AGENCY or Authorized Representative
Within the COB: <i>2013</i> Expense Code: <i>238-10 Office equipment</i> Budget: <i>101,000.00</i> Remarks: <i>changed to PRID - GASS</i>		
CONFORME: <i>Michael S. Samson</i> Signature over Printed Name and Position of authorized representative		Received copy of P.O.: <i>7-25-2013</i> Date