## REPUBLIC OF THE PHILIPPINES

## milippine Health Insurance Corporation

709 CityState Center Bldg. Shaw Blvd. Brgy. Oranbo, Pasig City

Tel: 637-6292 Fax: 637-3158

PRID-PS-07

## **PURCHASE ORDER**

Supplier	TOYOTA MANI	LA BAY CORPORAT	TON	P.O No.:	12-162-13		
Address	Roxas Blvd. cor	EDSA Extension Blvd.,	, Pasay City	Date:	December 27, 2013		
Tel.Fax No.	581-6188 / 5816	133		Term of Payment:	On Account		
Supplier Reg	jistered with	PHILHEALTH /	PHILGEPS	Mode of Procurement:	NP-Emergency Purchase		
	-			BAC-GS Reso	olution No. <u>149</u> , s. 2013		

Please deliver to this office within

from receipt hereof the following

NO.	QTY	UNIT		ITEM D	ESCRIPTIO	ON				1100 0000000000000000000000000000000000	ICE	TOTAL AMOUNT
1	, 2	, 2 UNITS PASSENGER WAGON VEHICLE								1,005	2,010,516.00	
			Brand : TOYOTA 2012	AVONNI	E DIESEL M/T	MODEL						
		6	Color : Silver (Therm									
			Note : Free 3 years		stration					4		
			Free 3 Yrs TP	<u> </u>						l vers		
2	1	UNIT	4 x 4 PICK-UP VEHICLE							1,458	,449.00	1,458,449.00
			Brand: TOYOTA HILUX 3.0 4 x 4 G M/T DIESEL (DOUBLE CAB)									
			Color : Lithium		a - 1/1							
			Note : Free 3 years LTO Registration						4			
			Free 3 Yrs TP	<del></del>								
											1	3,468,965.00
			LESS:		100							
				EWT	1%	30,972.90						
			DIV #	FVAT	5%	154,864.51	1	2	-	9 2	9	185,837.4
			RIV#		s: []			_				3,283,127.59
			13-0812 dtd. 12/18		22/2/2014	a - Evelyn C. Banga			3			
		I	13-0814 dtd. 12/18	3/13	Visayas Are	a - Evelyn C. Bang	alan					

Terms & Conditions:

- 1. Strictly in accordance with the attached Schedules of Requirements as Annex "A"
- 2. The agency shall impose penalty in an amount equivalent to 1/10 of one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
- 3. If the date of receipt of the 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
- 4. Delivery Receipt and Sales Invoice shall be required for the one-time complete delivery of the goods.
- 5. Defective, incompatible or non-compliant goods as to specification when quoted shall be rejected and replaced at no cost to PhilHealth.
- 6. 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.

7. Three (3) Years warranty on parts and service	
Very t	truly yours,
	RAMON F. ARISTOZA, JR
	Executive Vice President and COO
Certified Budget Available Funds Available in the amount of: Php3,468,965.00  MARILOU M. NAVAROZZA  Division Chief, Budget Division Phision Chief, Acctg. & Internal Control Unit  Comptrollership Department  Within the COB: 2013  Expense Code 243-ov C yno for Ukulick  Budget: 7 9,468,965.00  Division Chief, Acctg. & Internal Control Unit  Comptrollership Department  Within the COB: 2013  Expense Code 243-ov C yno for Ukulick  Budget: 7 9,468,965.00  Division Chief, Acctg. & Internal Control Unit  Comptrollership Department  Within the COB: 2013  Expense Code 243-ov C yno for Ukulick  Budget: 7 9,468,965.00	President and CED HEAD OF THE AGENCY or Authorized Representative
CONFO	ORME: fox: a- Colvo Sales Manager
Received copy of P.O on 01 29 14	Print Name and Signature of Supplier/Representative