REPUBLIC OF THE PHILIPPINES Philippine Health Insurance Corporation 6flr.Trinidad Bldg, Yacapin-Corrales Sts. Cagayan de Oro City

Telefax # 71-12-06

PURCHASE ORDER

Supplier:

FOOTPRINTS AWARD CENTRUM

Address:

Cagayan de oro city

Tel/Fax:

08822-729644

RIV#:

042-01R

Date:

January 21/2013

P.O.No.

1302P-047

Date :

February 15, 2013

Terms of payment

20-30 DAYS

Mode of Procurement:

Local shopping

Supplier Registered with:

Please deliver to this office within 15 working days from receipt hereof the following:

NO.	QTY.	Unit	ITEM D	ESCRIPTION	UNIT PRICE	TOTAL AMT.
	344	pcs	Finisher's Med	lal for 18K Category Nationwide-Run 2013	125.00	43,000.0
			For Philhealth	Nationwide-Run 2013	/	XXXXXXXXXXX
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- 1. The agency shall impose penalty in an amount equivalent to 1/10 of 1 percent of the total value of undelivered order for each day of the delay as Iquidated damages.
- Render your bills in triplicate copies including the original.
- 3.If the date of the receipt of the P.O. by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of the approval of the P.O.
- 4. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts, should be submitted by the supplier.

Funds available in the

emptrollership Unit Head -Designate

43,000 5

Very truly yours,

MARIA RHODELLA S. PARE Chief Management Services Division

Approved:

DATU MASIDING M. ALONTO, JR. **RVP PRO-10**

Received copy of P.O. on

Name and Signature of Supplier/Representative

BY: