

PURCHASE ORDER
Philhealth Regional Office 02

Supplier : STARSTUDIO DIGITAL NETWORKING	P.O. No. : 13-02-0026
Address : Querol Bldg., Mabini St., Tuguegarao City	Date : 02/27/2013
TIN : 926-817-527-000	P.R. No : 14473
Mode of Procurement: Shopping	Date : 02/27/13

Gentlemen:

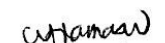

Please furnish this office the following articles subject to the terms and conditions contained herein.

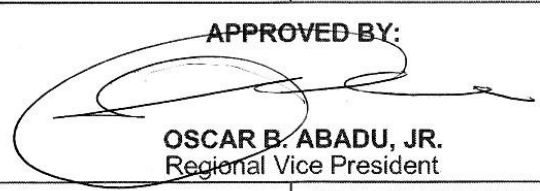
Place of Delivery: The Builders Place, Del Rosario St., Tuguegarao City	Delivery Term : 1
Date of Delivery : 02/28/13	Payment Term: Credit


Stock Number	Unit	Description	Qty	Unit Cost	Amount
U0585	Piece	BANNER, Tarpaulin Poster, 6ft x 10ft	1	1,080.000	1,080.00

(Total Amount in Words)*** One Thousand Eighty Pesos ***	1,080.00
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In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed. Render your bills in triplicate copies including the original. If the date of receipt of the PO by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of the approval of the PO. For imported items, IMPORTANT DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased and the tax receipts should be submitted by the supplier.

CONFORME:  <u>CARIE VINZELLE T. DAMICO</u> (Signature over Printed Name of Supplier)	<input checked="" type="checkbox"/> A Very truly yours,  LOVELYN B. SABBAN Division Chief IV - MSD
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<input checked="" type="checkbox"/> B <div align="center"> APPROVED BY:  OSCAR B. ABADU, JR. Regional Vice President </div>

<input checked="" type="checkbox"/> C Funds Available: <div align="center">  KELLY MAE D. GALIMAG Fiscal Controller III </div>	<table> <tr> <th>OBJECT OF EXPENDITURES</th> <th>AMOUNT</th> </tr> <tr> <td>1. _____</td> <td>_____</td> </tr> <tr> <td>2. _____</td> <td>_____</td> </tr> <tr> <td>3. _____</td> <td>_____</td> </tr> </table>	OBJECT OF EXPENDITURES	AMOUNT	1. _____	_____	2. _____	_____	3. _____	_____
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