

PHILIPPINE HEALTH INSURANCE CORPORATION Philhealth Regional Office VI, Majestic Bldg. #15 J. De Leon St., Iloila City

Tel Nos. 3378724 / 5087300 region6@philhealth.gov.ph

PURCHASE ORDER

P.D. NO

Date:

RIV No.:

Terms of Payment:

Mode of Procurement:

Supplier: GAISANO CAPITAL CITY ILOILO Address: Luna St., Lapaz, Iloilo City

3209702-07 Tel./Fax:

Supplier Registered with:

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	1	LOT	GIFT PACKS		
	170	pks	Tissue Paper	7.50	1,275.00
	170	pks	Bathroom Soap 35 gms	9.25	1,572.50
	170	pks	Toothpaste-Sachet	4.25	722.50
	170	pks	Toothbrush	10.50	1,785.00
	170	pks	Face Towel - small	10.00	1,700.00
	170	pks	Alcohol - Ethyl 60 ml	15.00	2,550.00
			Tokens for the hospital visitation and Sitio Colong Colong Medical Mission, on March 21-22, 2013		
				TOTAL	9,605.00

Terms and Conditions:

1. The Agency shall impose a penalty in the amount equivalent to 1/10 of 1 percent of the total value of undelivered order for each day of the delay as liquidated damages.

2. Render your bills in triplicate copies including the original.

3. If the date of receipt of this P.O. by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of the approval,

4. For imported items, IMPORTANT DOCUMENTS specifically showing the condition, serial numbers of the equivalent purchased, and tax receipts should be submitted by the supplier.

5. Defective, incompatible or non-compliant goods as to specification when quoted shall be rejected and replaced at no cost to Philhealth PhRO-VI.

Certified budget availability:

Within the C.O.B. Expense Code: Budget: Remarks:

JONALYN T. ILISAN Fiscal Controller III

9605

Fiscal Conroller IV

JEIJEN ROSE

Very truly yours,

MSD - FMS - COMPTROLLE

61303-056

182-02-13

COD

March 19, 2013

Negotiated Procurement

ABRIETO MAR MSD Chief

APPROVED:

DENNIS S. MAS, Ph.D. URP **Regional Vice President** PRO VI

915-03 Received copy of P.O. on:

Funds available in the amount of:

CONFORME:

GAISANO CAPITAL

(Printed Name & Signature of Supplier/Representative)