



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

REGIONAL OFFICE VII

8/F Golden Peak Tower, Gorordo Avenue cor. Escario St., Cebu City 6000
Healthlines 233-7407 ; 233-7523 ; 233-7519; 233-3289 www.philhealth.gov.ph

2-Apr-14

Date

JOB ORDER NO. 2014-023-04

Cebu New Life Press
San Nicolas St.
Tupas San Nicolas Cebu
Tel no. 4183476

140 04 05 4

Sir:

Please execute and / or furnish the following job and / or service :

| DESCRIPTION OF JOB OR SERVICE | CHARGE TO | | | | | | | | | | | | | | |
|--|--|----------------|--|-----|-----|-----|------------|--|--|--|--|--|--|-------|------------|
| Printing of forms 600 reams PMRF (mimeo whitewove, legal back to back) 400 reams ER2 (mimeo whitewove, short back to back) 250 reams BPN (A4 back to back, sub. 20) | PhRO-VII PR No. 14-02137 Dated : Feb. 17, 2014 | | | | | | | | | | | | | | |
| (MUST SUBMIT SAMPLE PRIOR TO FINAL PRINTING) | | | | | | | | | | | | | | | |
| <table border="1"><thead><tr><th colspan="2">BUDGET SECTION</th></tr><tr><th>OBJ</th><th>AMT</th></tr></thead><tbody><tr><td>863</td><td>269,387.50</td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr><tr><td>TOTAL</td><td>269,387.50</td></tr></tbody></table> | | BUDGET SECTION | | OBJ | AMT | 863 | 269,387.50 | | | | | | | TOTAL | 269,387.50 |
| BUDGET SECTION | | | | | | | | | | | | | | | |
| OBJ | AMT | | | | | | | | | | | | | | |
| 863 | 269,387.50 | | | | | | | | | | | | | | |
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| TOTAL | 269,387.50 | | | | | | | | | | | | | | |
| Total amount : P 269,387.50 | | | | | | | | | | | | | | | |
| Terms of payment : Within <u>30</u> working days upon complete delivery and acceptance of all requirements | | | | | | | | | | | | | | | |
| Duration of work : 1-5 weeks (upon approval of sample) | | | | | | | | | | | | | | | |
| Approved by: JOSETTE E. BACALSO, FC IV DESIGNATED BUDGET OFFICER | | | | | | | | | | | | | | | |

Requested by : Nellie Marie C. Banzon
AO IV

Prepared By

Jocelyn E. Divinagracia
ASO II

Recommending Approval

Atty. Gerardo S. Ortiz
Division Chief IV - MSD

Funds Available:

Josette E. Bacalso
Fiscal Controller IV

Approved by:

William O. Chavez
Regional Vice President

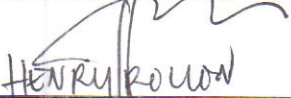
TERMS AND CONDITIONS

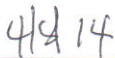
1. This Job Order (JO) was prepared in accordance with the supplier's quotation. The full quantity mentioned shall be supplied at the price stated and with the delivery period stipulated.
2. This JO should accompany the delivery together with the corresponding invoice. The delivery shall be paid only when supported by this JO.
3. In the event of the supplier's unjustified failure to make the delivery when due PHIC-PhRO VII thru its authorized representative/s shall impose either both of the following on the supplier as liquidated damages:
 - a. Deduct 1/10 of 1% of the value of this JO for each day of delay in the delivery schedule/s made after the stipulated period/s, or of the total value of the undelivered portion thereof
 - b. Make an open-market purchase of the undelivered items and charge to the defaulting supplier the excess in the price, if any.

In either case, PHIC-PhRO VII reserves the right to rescind or cancel the obligation of the supplier to deliver any and/or all items under this JO without prejudice to the penalties of the supplier under this section. Provided, further that PHIC-PhRO VII may deduct the value of the penalty imposed or damage incurred from any money due or which may become due the supplier and/or to recover from the supplier's Performance Bond, if there is any.

4. If supplier cannot fill this order due to justifiable cause/s, this J.O must be returned before the the delivery due date with the covering transmittal letter stating reason/s for returning this J.O
5. All items shall be subject to inspection and acceptance by PHIC-PhRO VII or its duly authorized representative/s.
6. Rejected item/s shall be withdrawn from PHIC-PhRO VII premises within five (5) days upon receipt or oral or written " Notice for Rejected Goods" at supplier's expense.

ORIGINAL RECEIVED AND TERMS AND CONDITIONS ACCEPTED:


Signature Over Printed Name


Date