## Republic of the Philippines PHILHEALTH REGIONAL OFFICE -CAR

4/F SSS Bldg., Harrison Road, Baguio City Tel. # (074) 444-9862 / 444-8361 / 446-0371

## JOB ORDER

| Supplier:             | Toyota Baguio City                             | J.O. No.:            | J-042-13           |  |
|-----------------------|--|----------------------|--------------------|--|
| Address:              | Bokawkan Rd. Corner Aguila Street, Baguio City | Date:                | Aug. 28/2013       |  |
| Tel./Fax No.:         | 3003273  | Term/s of Payment:   | C.O.D              |  |
| Supplier Registered w | ith:   | Mode of Procurement: | Direct Contracting |  |

Please deliver to this office within

2 days

from receipt hereof the following:

| NO. | QTY | UNIT  |                                 | UNIT PRICE | TOTAL AMOUNT |
|-----|-----|-------|---------------------------------|------------|--------------|
|     | 2.  | units | Repair of Vehicle Toyota Innova |            |              |
|     |     |       | **1,000 km check up             |            |              |
|     |     |       |                                 |            | 9,850.38     |
|     |     |       |                                 |            |              |
|     |     |       |                                 |            |              |
|     |     |       |                                 |            |              |
|     |     |       |                                 |            |              |
|     |     |       |                                 |            |              |
|     |     |       | Total                           |            | 9,850.38     |
|     |     |       | Less: 5% Final Tax 439.75       |            |              |
|     |     |       | 2% EWT 175.90                   |            | 615.65       |
|     |     |       | Net of Tax 615.65               |            | 9,234.73     |
|     |     |       |                                 |            |              |
|     |     |       |                                 |            |              |
|     |     |       |                                 |            |              |
|     |     |       |                                 |            |              |
|     |     |       |                                 |            |              |

Terms & Conditions:

- 1. The agency shall impose penalty in an amount equivalent to 1/10 of 1% of the total value of undelivered order for each day of the delay as liquidated damages.
- 2. If the date of receipt of the Purchase Order/P.O. by the dealer is not indicated, it shall be deemed received on the day it was acknowledged to have been received by a representative either through fax or e-mail.
- 3. Delivery Receipt and Sales Invoice shall be required for the one-time complete delivery of the goods.
- 4. Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery.
- 5. 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.

Very truly yours,

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|   |   |         |           | Juniaman   |
|---|---|---------|-----------|--|
|   |   |         |           | IMELDA CRISTETA D. VILLAMAR<br>Division Chief, MSD       |
| Certified Budget Available  | Funds Available in the amount of:             | PhP 9,8 | 850.38    | APPROVED:  |
| Juli Berth M. PALACI         Fiscal Controller I         Within the COB:       201         Expense Code:       \$41         Budget: | Maria Linda H. Ga<br>Fiscal Controlle<br>7-00 |         |           | fatty. Jerry F. Ibay<br>Regional Vice President, PRO-CAR |
| Received Copy of J.O. on  |   |         | Print Nar | he and Signature   |