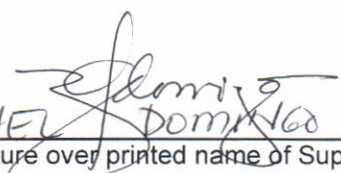
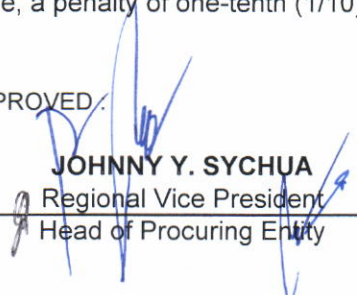



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
 Lynzee's Bldg., #766 J. Rosales Ave., Butuan City
 Tel.# 341-1159 / 341-6488 / 342-6992

PURCHASE ORDER

Supplier: <u>DOTTIES PLACE HOTEL AND RESTAURANT</u> Address: <u>J.C. Aquino Avenue, Butuan City</u> Tel/Fax No.: <u>341-4575 to 79</u> Supplier Registered with: <u>DTI No.</u>		P.O. No.: <u>07-13-184</u> Date: <u>July 9, 2013</u> Mode of Procurement: <u>Local Shopping</u>		
Gettlemen : Please furnish this office the following articles subject to the terms and conditions contained herein: <div style="display: flex; justify-content: space-between;"> <div> Place of Delivery : <u>PhilHealth Regional Office - Caraga</u> Date of Delivery : <u>JUL 11 2013</u> </div> <div> Delivery Term : <u>10 calendar days</u> Payment Term : <u>on account</u> </div> </div>				
Unit	ITEMS DESCRIPTION	QTY.	UNIT COST	AMOUNT
	FOOD AND VENUE for the capability building and conduct of updates on Maternity Care/Newborn Care Packages (MCP/NCP) on July 11, 2013			
pax	AM Snacks: Tuna Sandwich with potato chips; glass of juice	98	120.00	11,760.00
pax	Lunch: Crabmeat sepcial; Garlic chicken; Pancit Canton Guisado; Fresh Fruits; Rice; Softdrinks	98	260.00	25,480.00
pax	PM Snacks: Moist Chocolate Cake; Glass of juice	98	120.00	11,760.00
JO	Room, for 75 participants two (2) days on July 10 & 11, 2013 36 rooms Standard double sharing with complimentary breakfast and dinner for two (2) days	1	1,240.00	186,000.00
				235,000.00
	Less: WVAT gross/1.12 x 5% 10,491.07			14,687.50
	EWT gross/1.12 x 2% <u>4,196.43</u>			220,312.50
Note: * If services deviate or beyond the utilization mentioned above, PhilHealth shall pay based on actual, computed at per person rate				
RIV# 13-07-176 dtd. 7/2/13		<div style="border: 1px solid black; padding: 5px; text-align: center;"> WITHIN THE COB 753/767-00 for: <u>7/9/2013</u> MARCELITO M. MAGTIBAY FE A1 BUDGET OFFICER III DESIGNATE </div>		
(Amount in Words) TWO HUNDRED THIRTY FIVE THOUSAND PESOS ONLY In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one (1) percent of every day of delay shall be imposed.				
CONFORME: <div style="text-align: center;">  <u>MECHEL DOMINA</u> Signature over printed name of Supplier </div> <div style="text-align: center; margin-top: 20px;"> <u>JUL 9, 2013</u> DATE </div>		APPROVED: <div style="text-align: center;">  JOHNNY Y. SYCHUA Regional Vice President Head of Procuring Entity </div>		
Funds Available : <div style="text-align: center;">  JULIETA L. BARIQUIT, CPA, MBA Fiscal Controller IV </div>		BRO No.: <u>CGA-13-017-01 (MOOE)</u> Amount : <u>P 235,000.00</u>		