## Republic of the Philippines

Supplier: GLOBE TELECOM, INC.

## PHILIPPINE HEALTH INSURANCE CORPORATION

Lynzee's Bldg., #766 J. Rosales Ave., Butuan City Tel.# 341-1159 / 341-6488 / 342-6992

## **PURCHASE ORDER**

07-13-186

P.O. No.:

Address: Gaisano Bldg., J.C Aquino Ave., Butuan City		Date:	July 9, 2013	
Tel/Fax	Tel/Fax No.: none		Mode of	
Supplie	r Registered with: DTI#		Procurement:	Local Shopping
Gettlemen:				
Please furnish this office the following articles subject to the terms and conditions contained herein:				
DI	f Dell'anna Blattlandth Benianal Office Comme	Dalivan	. Torm : 40 workin	a daya
	f Delivery : PhilHealth Regional Office - Caraga		/ Term : <u>10 working</u> nt Term : <u>C O D</u>	<u>q days</u>
Date of Delivery : Payment Term : C O D				
Unit	ITEMS DESCRIPTION	QTY.	UNIT COST	AMOUNT
Orne	TEMO DESSIMINON			1
			500.00	0.000.00
pcs.	Globe Prepaid Card at P 500.00	4	500.00	2,000.00
	Less: WVAT gross/1.12 x 5% 89.29	3.5		
	EWT gross/1.12 x 1% 17.86			107.15
				1,892.85
	1			
	NOTE: Original copy of RIV, Call for Quotation, Abstract of			
	Canvass attached to PO#07-13-185 dtd. 7/9/13, Margarita			
	Mobile Shop			
	WITHIN THE SOB 2013			
	196-00			
	MARCE TO MAGTIBAY			
	FE AL BUDGET OFFICER III DESIGNATO			
	and the contraction of the state of the stat			
	RIV# 13-06-158 dtd. 6/11/13			
(Amount in Words ) TWO THOUSAND PESÓS 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.				
			APPROVED:	11/
			71110	4
_			NAHOL	Y Y. SYCHUA 4
			a Regional	Vice President
	CONFORME:		Head of	Procuring Entity
	CALL OF AME		0, 1,	
	w. I		1	
	Signature over printed name of Supplier			
	7/2/2			
_	DATE			
	DATE			
Funds Available :				
	$d\omega$ .		BRO No.: CGA-	13-017-01 (MOOE)
	JULIETA L. BARIQUIT, CPA, MBA		Amount : <b>P2,00</b> 0	0.00
	Fiscal Controller IV			