

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: <b>RINOGRAPHIX PRINTSHOP ENTERPRISE</b>	P.O. No.: <b>03-13-103</b>
Address: <b>South Monitlla Blvd., Butuan City</b>	Date: <b>March 26, 2013</b>
Tel/Fax No.: <b>341 7466</b>	Mode of
Supplier Registered with: <b>DTI No.</b>	Procurement: <b>Local Shopping</b>

Gettlemen :  
 Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery : <b>PhilHealth Regional Office - Caraga</b>	Delivery Term : <b>30 calendar days</b>
Date of Delivery : <b>MAY 06 2013</b>	Payment Term : <b>on account</b>

Unit	ITEMS DESCRIPTION	QTY.	UNIT COST	AMOUNT
pc.	Pre-printed Certificate - Material: Parchment Paper, A4 size - Includes printing services (provided with softcopy)	500	3.00	1,500.00
	Less: WVAT gross/1.12 x 5% 66.96			
	EWT gross/1.12 x 1% 13.39			80.35
				<b>1,419.65</b>
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <b>WITHIN THE COB 2013</b>            114-10  <b>MARCELITO M. MAGTIBAY</b>            FE A: BUDGET OFFICER III DECA 2013         </div>				
RIV# 13-02-053 dtd. 2/7/13				

(Amount in Words ) **ONE THOUSAND FIVE HUNDRED 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:

\_\_\_\_\_  
 Signature over printed name of Supplier  
**April - 5-2013**  
 DATE

APPROVED :

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**JOHNNY Y. SYCHUA**  
 Regional Vice President  
 Head of Procuring Entity

Funds Available :  <div style="text-align: center; margin-top: 20px;"> <b>for: April 4/2</b>  <b>JULIETA L. BARQUIT, CPA, MBA</b>          Fiscal Controller IV       </div>	BRO No.: <b>CRG-13-017-01(MOOE)</b> Amount : <b>P 1,500.00</b>
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