REPUBLIC OF THE PHILIPPINES **Philippine Health Insurance Corporatio**

709 CityState Center Bldg. Shaw Blvd. Brgy. Oranbo, Pasig City

TeleFax: 637-3158

PRID-PS-08

upon approval of the following

JOB ORDER (Non-Inventoriable Items)

Supplier	FMR CORPOR	RATION	Work Order No.	14-01-001 January 14, 2014	
Address	273 Roosevelt A	ve. San Francisco Del Monte, Quezon City	Date:		
Tel.Fax No.	741-5078, 413-3290, Telefax No. 742-5980		Term of Payment:	On Account, _	_ ,
Supplier Registered with:		PHILHEALTH	Mode of Procurement:	small value	م کیم
			Office Ord	er No. 0161, s. 2012	— (

As per schedule

NO.	QΤΥ	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
1	1	lot	RENTAL OF 60-SEATER BUS ON JAN. 13 & 17 2014 "Quality Management System (QMS) Documentation Writeshops @ Tagaytay City	24,500.00	24,500.00
			Pick-up PhilHealth Pasig @ 7:00 AM on Jan. 13, 2014 and drop to Tagaytay City Pick-up Tagaytay City @ 2:00 pm on Jan. 17, 2014 and drop to PhilHealth Pasig		
	-		LESS: EWT 5% 1,093.75		24,500.00
			GMP 5% 1,093.75	-	2,187.50 22,312.50
	!		RIV # 14-0001 dtd. 01/06/14, PRID-GSBMD - Emily D. Briones		

Terms & Conditions:

- 1. All buses/coaster to be used shall be provided by the supplier/contractor and it shall be the supplier's responsibility to maintain such buses/coaster in good, safe, working order and in compliance with all laws and regulations applicable thereto.
- 2. All drivers must be appropriately licensed, competent, responsible individuals and shall be employees of the supplier. In the event of default, supplier shall be liable for any expense including but not limited to damages, attorney's fees and court cost.
- 3. Operate the service in accordance with the approved timetable;

Please deliver to this office within:

- 4. Convey all participants who at the appropriate time are present at such place or places as specified in this Job Order;
- 5. The supplier should not sub-contract the whole or any part the service without prior written consent from the Corporation

-	ELY E. ROXAS Administrative Officer III
CORAZON M. TABULAO Fiscal Controller III Within the COB: Expense Code: Budget: Budge	APPROVED: LEILA S. TUAZON OIC, HEAD - SBAC HEAD OF THE AGENCY or Authorized Representative
CONFORME: Closed Boy Ador Signature over Printed Name and Position of authorized representative	Received copy of J.O.:

Very truly yours,