REPUBLIC OF THE PHILIPPINES

Philippine Health Insurance Corporation
709 CityState Center Bldg.
Shaw Blvd. Brgy. Oranbo, Pasig City
TeleFax: 637-3158 637-4735

## PRIORITY

## JOB ORDER

				(Non-Inventoriable	e Items)			
Supplier BEST SHOT PRINTING						: Order No. 14-07-071		
Address 109 Kamias Rd., Quezon City						Date:	e: July 22, 2014	
Tel.Fax No. 435-0772, 924-2548					•	Term of Payment:	On Account	
	applier Registered with:  PHILHEALTH					e of Procurement:	Small Value Procurement	
Pleas	se deliver	to this	office within	45 working	g days	upon ap	proval of the fo	ollowing
NO.	itional five (	five (5) working days for approval of sample  Y UNIT SERVICE DETAILS					UNIT PRICE	TOTAL AMOUNT
	219	PCS	PRINTING OF CORPO	RATE BUSINESS CARDS			279.00	61,101.00
	ı		Specs:					
		1	Size:	9 cm (w) x 5.25 cm (h	}			
			Finish:	Matte Spot UV				
			Stock:	Special Paper				
ļ			Process:	Offset Printing			ļ .	
							Ĺ	61,101.00
				LESS:	EWT 2%	1,091.09		
				1	GMP 5%	2,727, <b>7</b> 2		3,818.81
		1						57,282.19
			RIV #					
			14-0311 dtd. 04,	/15/14 Corcomm, 14-043	8 dtd. 05/08	3/14 OVP, VP-		
		1	OSDO & Corplo	n, 14-0349 dtd. 05/08/14	OVP, VP-OS	SDO & Corplan	07 - 3	13
	ļ							. •
<ol> <li>Deliver Section during 1503 C</li> <li>Deliver</li> <li>Defect</li> </ol>	ry of the a n at least Mon/Wed itystate C ry Receipt ive, incon	above iter two (2) d J/Fri (MW itr. Bldg. t and Sale npatible (	n(s) shall be made wi ays before the deliver F). All item(s) shall be Pasig City Is Invoice shall be redi	representative either thin the prescribed schey. Use of elevator shale delivered and accepted for one-time compods as to specification unit in case of repair.	edule dates I only be fro ed by the Pi plete delive when quot	s. Supplier are advise om 09:00 to 11:30 a. rocurement Section a ery of the goods. ed shall be rejected truly yours,	m. and 1:30 to 3 at 15th Floor, Ro	om
					_		LY E. ROXAS	
						Admii	istrative Officer	
Certified Bu	dget Availab	ole:	Funds Available in the an	nount of: Php61	,101.00	APPROVED:		
	ORAZON Fiscal Co	M. TABUI		LILIA F. GARRIDO	120/14	Ja	uhar Au	13°
							ILA S. TUAZON	
within the cos: 2014							C, HEAD - SBAC	
Expense Code: 863-00 / GAS S							AD OF THE AGENCY	
Budget:		(inches	)			or Auth	orized Representat	ive
Remarks:	Char		Concomm, all				94	/
Rec	eived cop	y of J.O o	on		CONF	Print Nam	nll   End   I	ESMABOR