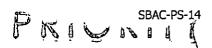
REPUBLIC OF THE PHILIPPINES Philippine Health Insurance Corporation

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

<u>JOB</u> <u>ORDER</u> (Non-Inventoriable Items)



Supplier

EVENTASTIC CONSULTANCY AND MARKETING SERVICES

PHILHEALTH

J. Order No:

44 44 404

Address

Blk 21 Lot 6, Palosapis st. Alfonso Homes 1, Sta Rosa Laguna

Date:

November 10, 2014

Tel.Fax No.

049-3029129 0915-9088295

Terms of Payment

Mode of Procurement:

On Account
Small Value Procurement

Please deliver to this office within

Supplier Registered with:

As per schedule

upon approval of the following

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
1	3 lots		10 SECONDS AVP'S FOR PHILHEALTH NATIONWIDE RUN LAUNCH Specs: Time Frame: 10 seconds per AVP with Graphics with Voice Over Recording Client will provide the concept/script Final output must be in DVD format, with case & label	28,000.00	84,000.00
			LESS: EWT 2% 1,500.00 GMP 5% 3,750.00 RIV # 14-0989 dtd. 10/28/14 CorMar		84,000.00 5,250,00 78,750.00

Terms & Conditions:

- 1. The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of order for each day of the delay as liquidated damages.
- 2. If the date of receipt of the Job Order (J.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledge to have been received by a representative either through fax or e-mail
- 3. Delivery of the above item(s) shall be made within the prescribed schedule dates. Supplier are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall only be from 09:00 to 11:30 a.m. and 1:30 to 3:00 p.m. during Mon/Wed/Fri (MWF). All item(s) shall be delivered and accepted by the Procurement Section at 15th Floor, Room 1503 Citystate Ctr. Bldg. Pasig City
- 4. Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- 5. Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery. With provision for a back-up unit in case of repair.

Very truly yours,

ELY E. ROXAS

Administrative Officer III

Certified Budget Available:	Funds Available in the amount of:	Php84,000.00	APPROVED:	1
CORAZON M. TABUI		R. JARRIDO Controller III	Janhay Maz LEILA S. TUAZON	
Within the COB: Expense Code: Budget: Kernarks: Within the COB: Expense Code: ### 80, 0x0 -	1 GAPES	11-200	OIC, HEAD - SBAC HEAD OF THE AGENCY or Authorized Representative	
Received copy of J.O o	n //#/14	CONFORA	Print Name and Signature Of Supplier/Representative	fi