REPUBLIC OF THE PHILIPPINES

Philippine Health Insurance Corporation

709 CityState Center Bldg. Shaw Blvd. Brgy. Oranbo, Pasig City Telefax No. 637-3158 637-4735

PRID-PS-07

PURCHASE ORDER

Supplier	NATIONAL PI	RINTING OFFICE	< Order No.	05-029-14 May 27, 2014	
Address	Edsa cor. NPO Ro	I. Diliman, Quezon City	Date:		
Tel.Fax No.	925-2184 loc. 2	03 206 925 925-2189 925-2197	Term of Payment:	C.O.D	
Supplier Registered with:		PHILHEALTH	Mode of Procurement:	Direct Contracting	

Please deliver to this office within

C.O.D

from receipt hereof the following

Plea	ise delive	t to uns t	onice within C.O.D				from receipt hereof the following		
NO.	QTY	UNIT			п	EM DESCRIPTION		UNIT PRICE	TOTAL AMOUNT
1	22	PCS	ı		OOK FOR REG NO. 103)	GULAR DISBURSEMENT OFFICER		420.00	9,240.00
									9,240.00
			14.0207	ر. د. د	05/02/14	0 5 - 4	07		
			14-0396	dtd.	05/23/14	PRID - 1st Quarter Stock			

Terms & Conditions:

- 1. The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
- 2. If the date of receipt of the Purchase Order / P.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
- 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, ÉLY E. ROXAS Administrative Officer III Php9,240.00 Certified Budget Availa Funds Available in the amount of: APPROVED: GARRIDO 30 CORAZON M. TABULAO Fiscal Controller III Fiscal Controller III **LEILA S. TUAZON** Within the COB: OIC Head - SBAC Expense Code: HEAD OF THE AGENCY VANOU Budget: or Authorized Representative Remarks: CONFORME: Received copy of Seignatuse over Rrinted Name and Position of authorized representative