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

				PU	RCHAS	E ORDE	R		·	
Supplier BAYAN PC TECHNOLOGIES, INC.								Order No. 06-032-14		
Address							uezon City	Date:	June 5, 2014	
Tel.Fax No. 434-9817						Term of Payment:			On Account .	
Supplier	Registere	ed with:	PHILHEALTH Mode of Procurement:					Small Value Procurement		
						_		•		
Plea	se delive	r to this	office within	1	.0 worki	ing days	3	from rece	ipt hereof the	following
NO.	QTY	UNIT	ITEM DESCRIPTION						UNIT PRICE	TOTAL AMOUNT
1	1	unit	REMOTE CLICKER Presentation Remote Clicker, Wireless, USB Brand: Logitech R400						2,220,00	2,220.00
ı								ļ		
								•		2,220.00
					LESS:	EWT	1%	19,82		
						GMP	5%	99.11		118.9
										2,101.0
						r		06-1	06	
			RIV #						vo	
			14-0202 dtd.	03/07/14		Con	nptrollership	p		
order f 2. If the c it was a 3. Deliver Section during 1503 C 4. Deliver 5. Defection	ency shall or each de late of recacknowled yof the an at least of Mon/Wed itystate Coy Receipt delivery.	impose p ay of the of ceipt of the dge to have bove item two (2) da /Fri (MWF tr. Bldg. P and Sales apatible of With pro	enalty in an amodelay as liquidate Purchase Ordere been received also shall be maders before the defair. All item(s) shall be roon-compliant vision for a back	ed damages. er / P.O. by t I by a represe le within the elivery. Use o all be deliver e required for of goods as t	he dealer intative eit prescribed f elevator ed and acc one-time o specifica	is not indictiver through schedule shall only tepted by the complete complete complete.	cated, it shigh fax or e- dates. Supple from 09 the Procure delivery of quoted shi	nall be deemed -mail plier are advise 0:00 to 11:30 a. ement Section a the all be rejected	received on the ed to inform Pro m. and 1:30 to at 15th Floor, R	e day ocurement 3:00 p.m. oom
						Ve	ry truly y	ours, ÆĹ	Y E. ROXAS	
1					1				trative Officer II	!
	ORAZON A Fiscal Co	A. TABULA		LILIA R	GARRIDO Controller I		API	LEIL	May S a s. Tuazon	lua j
Within the Ci Expense Code		2014							Head - SBAC OF THE AGENCY	
Budget:	\$ 2.2	15-00 20 1		•					ized Representative	•
Remarks:	charge	able b	gainst Comp	trollership	Dept.		-			

Signature over Printed Name and Position of authorized representative

Received copy of P.O.:

Date

CONFORME: