

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 **PBT TECHNOLOGY SOLUTIONS, INC.**
Address **Unit A4 Marvin Plaza bldg. Don Chino Roces Ave. Makati City**
Tel.Fax No. **818-9497**
Supplier Registered with: **PHILHEALTH**

P.O No. **06-048-14**
Date: **June 30, 2014**
Term of Payment: **On Account**
Mode of Procurement: **Local Shopping**

Please deliver to this office within **15 working days** from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	103	ca	Ink Cartridge HP C4908AA, (HP940XL), Magenta (HP Officejet Pro 8000/8500)	953.00	98,159.00
2	102	ca	Ink Cartridge HP C4909AA, (HP940XL), Yellow (HP Officejet Pro 8000/8500)	953.00	97,206.00
3	43	ca	Toner Cartridge, HP CC364A, Black (HP Laserjet Network Printer P4014/P4015/P4515)	6,768.00	291,024.00
					486,389.00
LESS: EWT 1% 4,342.76					
GMP 5% 21,713.79					26,056.55
					460,332.45
RIV					
14-0374 dtd. 05/20/14 PRID - GSBMD Cristina G. Monsalud					

Terms & Conditions:

- 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.
- 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
- 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
- Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the
- 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,

[Signature]
ELY E. ROXAS

Administrative Officer III

Certified Budget Available <i>[Signature]</i> EDITHA O RAMASTA Fiscal Controller IV	Funds Available in the amount of Php486,389.00 <i>[Signature]</i> WILLIE M. BUMACOD Fiscal Controller IV	APPROVED: <i>[Signature]</i> LEILA S. TUAZON OIC Head - SBAC HEAD OF THE AGENCY or Authorized Representative
Within the COB: Expense Code: <i>[Signature]</i> Budget: <i>[Signature]</i> Remarks: <i>[Signature]</i>		
CONFORME: <i>[Signature]</i> Signature over Printed Name and Position of authorized representative	Received copy of P.O.: <i>[Signature]</i> Date <i>7/9/14</i>	

faxed 7/9/14