REPUBLIC OF THE PHILIPPINES

Philippine Health Insurance Corporation

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

PURCHASE ORDER

Supplier	BESTCHOICE ENT	ERPRISES	P.O No.	08-073-14
Address	#330 Palon St. Grace	oark, Caloocan City	Date:	August 13, 2014
Tel.Fax No.	806-6644 253-4382		Term of Payment:	On Account
Supplier Registered with:		PHILHEALTH	Mode of Procurement:	Small Value Procurement

Plea	se delive	r to this c	fice within 20 working	20 working days from reco		eipt hereof the following	
NO.	QTY	UNIT	ITEM DESCRIPTION			UNIT PRICE	TOTAL AMOUNT
1	21	Са	Ink Cartridge for HP Fax Machine J4660	No. 901, Calarea	d	700.00	14,700.00
2	25 -	ca	Toner Cartridge for Brother Fax Mahine Model: 2820, TN-2025			2,300.00	57,500.00
3	3,	са	Toner Cartridge for Canon Fax Machine, Model: FX-3			2,500.00	7,500.00
4	2 '	ca	Toner Cartridge for Canon Fax Machine	Model : MF-435	50D*(FX9S)	2,700.00	5,400.00
			LESS: EW G/ RIV # 14-0397 dtd. 05/23/14 PRID - Cristi		759.82 / 3,799.11 /	2 1 5	85.100.00 4.558.93 80,541.07
		(igo)		na G. Monsalua na G. Monsalud		213	

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,

ELY E. ROXAS

			Administrative Officer III		
Certified Budget Available:	Funds Available in the amount of:	Php85,100.00	APPROVED:		
CORAZON M. TABI Fiscal Controller Within the COB: Expense Code: 1770 Budget: 987, 400 Remarks:	ULAO LILIA R/.	GARRIDO Introller III	LEILA S. TUAZON OIC Head - SBAC HEAD OF THE AGENCY or Authorized Representative		
CONFORME:	V r		Received copy of P.O.:		
Signature	e over Printed Name and Position of representative	Date			