

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 **AMERICAN TECHNOLOGIES, INC.** P.O No. **08-078-14**  
 Address **# 5 Ideal St. Cor. McColough St., Brgy. Additional Hills, Mandaluyong City** Date: **August 28, 2014**  
 Tel.Fax No. **584-0000 584-6868** Term of Payment: **On Account** ✓  
 Supplier Registered with: **PHILHEALTH** Mode of Procurement: **Small Value Procurement** ✓

Please deliver to this office within **30 working days** from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	2	units	<b>SCANNER, DOCUMENT SCANNER, AUTO-DOCUMENT FEEDER</b>  Brand/Model: <b>FUJITSU F16750s</b> • Scanning Method: Color CCD • Scan resolution, Optical - Up to 600 dpi • Daily Duty Cycle, 8,000 pages • Document Size: A3, A4, letter, legal, B5 • Other: 1 TB external hard drive • One (1) year warranty	189,000.00	378,000.00
					378,000.00
			LESS: EWT 1% 3,375.00 ✓ GMP 5% 16,875.00 ✓		20,250.00 ✓
					<b>357,750.00</b> ✓
			RIV # 14-0164 dtd. 03/05/14 CorPlan - Monifer S. Bansil 14-0715 dtd. 08/21/14 PRID - Emily D. Briones		

**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
- Detective, 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:	Funds Available in the amount of:	Php378,000.00	APPROVED:
<div style="display: flex; justify-content: space-around;"> <div> <i>[Signature]</i>  <b>EDITHA O. RAMASTA</b>            Fiscal Controller IV         </div> <div> <i>[Signature]</i>  <b>WILLIE M. BUMACOD</b>            Fiscal Controller IV         </div> </div>		<i>[Signature]</i> <b>LEILA S. TUAZON</b> OIC Head - SBAC HEAD OF THE AGENCY or Authorized Representative	
Within the COB: <b>2014</b> Expense Code: <b>238-20 CIT Equipmt</b> Budget: <b>9,578,000.-</b> Remarks: <b>changed to PRID, Corplan CASS</b>		<b>08-435</b>	
CONFORME:		Received copy of P.O.:	
Signature over Printed Name and Position of authorized representative		Date	

*Approved 9/15/14*