



Republic of the Philippines  
**PHILIPPINE HEALTH INSURANCE CORPORATION**  
ANST BLDG III ALTERNATE RD LEGAZPI CITY 4815597

POMM-P-006

**PURCHASE ORDER**

PHILHEALTH REGIONAL OFFICE V

Supplier: RBG ELECTRONICS  
Address: Session Rd, Baguio City  
Tel.Fax No.: \_\_\_\_\_  
Supplier Registered with: \_\_\_\_\_

PO No. 14-12-0078  
Date: 22-Dec-14  
Terms of Payment: Charge  
Mode of Procurement: Small Value Procurement

Please deliver to this office within 15 DAYS from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	1	lot	Public Address System		55,000.00
			description:		
	2	pcs	70V Wall mounted Speaker		
	2	pcs	Wall mounted outlet for microphone & audio/line		
	1	pc	Zone Controller		
	1	lot	Relocation and installation of existing sound		
			system equipment to the public address cabinet		
	1	lot	Configuration of Public Address system in conference		
			room with switch controller and additional equipment		
			in cabinet		
	15	m	AWG#22 Speaker Cable		
	30	m	Audio Line Shielded cable		
	1	lot	Roughing -Ins, mounting support system, consumables &		
			miscellaneous		
			(labor, equipment, mobilization...included )		55,000.00

**Terms & Conditions:**

1. Purchase Order (PO) shall be accepted by the supplier before the delivery of goods and/ or services.
2. NO price increase shall be made by the supplier within seven (7) days from the date of the acceptance of PO.
3. Non-availability of stock shall be made known to PhilHealth before the acceptance of PO.
4. PhilHealth shall have the right to reject and return the items and cancel the corresponding PO if goods delivered are defective, incomplete or non-compliant as specification when quoted.
5. In case of returned/rejected items which cannot be replaced within seven (7) calendar days from notice, PhilHealth shall demand full refund of payment made "in cash" or "in check" three (3) calendar days. Deliveries should be made within office hours on working days on or before the date stipulated in the PO.

Very truly yours,

LORENA M. RUBIS  
Chief, MSD

**NOTE: This serves as a Notice to proceed**  
2014  
CAPEX, 238-10  
55,000.00

Certified Budget Available: <u>2014-12-00287</u> in the amount of: <u>55,000.00</u>	APPROVED:
 LERI L. AGAN Budget officer Designate	 ORLANDO D. INIGO JR. RVP - PROV
With in the COB: _____ Expense Code: _____ Bdget: _____ Remarks: _____	
Conforme: RAYMOND B. GUINABO Signature over Printed Name and Position of Authorized Representative	DEC. 29, 2014 Date

**INSTRUCTIONS ON HOW TO USE THIS FORM:**

1. This form shall be used for simple purchases of supplies & other materials, for one time delivery or other simple delivery items.
2. This form shall be accomplished by the staff of the Procurement Section upon decision of the Division Chief & Senior Manager as to which supplier has submitted the lowest quotation and if it had met the required specs.