Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
Lynzee's Bldg., #766 J. Rosales Ave., Butuan City
Tel.# 341-1159 / 341-6488 / 342-6992

PURCHASE ORDER

Supplier: **ORVILLE B. VELOSO**
Address: Butuan City
Tel/Fax No.: none
Supplier Registered with: **DTI #** ____

P.O. No.: **09-14-187**
Date: September 11, 2014
Mode of Procurement: Local Shopping

Gettlemen :

Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery : **PhilHealth Regional Office - Caraga**
Date of Delivery : OCT 0 2 2014

Delivery Term : **20 calendar days**
Payment Term : **cash**

Unit	ITEMS DESCRIPTION	QTY.	UNIT COST	AMOUNT
pcs.	Rubber Stamp " JOEL ARTURO S. DE JESUS, MD"	3	180.00	540.00
pcs.	Rubber Stamp " EDUARDO S. GONZALEZ, MD"	3	180.00	540.00
pcs.	Rubber Stamp " ICD-10 CODE NOT FOUND IN ANNEX ______"	2	150.00	300.00
pcs.	Rubber Stamp " POINT OF CARE"	2	40.00	80.00
pcs.	Rubber Stamp " JOHNNY Y. SYCHUA"	2	80.00	160.00
				1,620.00
	Less: NVAT gross x 3% 48.60			
	EWT gross x 1% 16.20			64.80
				1,555.20
	WITHIN THE COB 2014 974-10 MARCELITO N. MAGTIBAY FE A. BUDGET OFFICER III DESIGNATE			
	RIV# 14-08-210 dtd. 8/19/14			

(Amount in Words) **ONE THOUSAND SIX HUNDRED TWENTY PESOS ONLY**

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one (1) percent of every day of delay shall be imposed.

CONFORME:

ORVILLE B. VELOSO
Signature over printed name of Supplier

9/12/14
DATE

APPROVED :

JOHNNY Y. SYCHUA
Regional Vice President
Head of Procuring Entity

Funds Available :

JULIETA L. BARIQUIT, CPA,MBA
Fiscal Controller IV

BRO No.: **CRG-14-164-09 MOOE)**
Amount : **₱ 1,620.00**