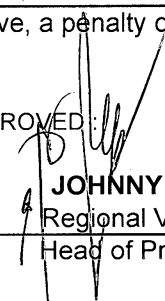


Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
Lynzee's Bldg., #766 J. Rosales Ave., Butuan City
Tel.# 341-1159 / 341-6488 / 342-6992

PURCHASE ORDER

Supplier: <u>COMPAÑERO COMMERCIAL</u>		P.O. No.: <u>11-14-230</u>		
Address: <u>L. Jaena Street, Butuan City</u>		Date: <u>November 27, 2014</u>		
Tel/Fax No.: <u>342-9111</u>		Mode of		
Supplier Registered with: <u>DTI No. 01760</u>		Procurement: <u>Local Shopping</u>		
Gettlemen : Please furnish this office the following articles subject to the terms and conditions contained herein:				
Place of Delivery : <u>PhilHealth Regional Office - Caraga</u>		Delivery Term : <u>15 calendar days</u>		
Date of Delivery : <u>DEC 19 2014</u>		Payment Term : <u>on account</u>		
Unit	ITEMS DESCRIPTION	QTY.	UNIT COST	AMOUNT
pc.	Sign Pen, gel type, 0.5, color: green	100	17.00	1,700.00
	Less : WVAT gross/1.12 x 5% 75.89			
	EWT gross/1.12 x 1% 15.18			91.07
				<u>1,608.93</u>
NOTE: Original copy of RIV, Call for quotation and Abstract of Canvass attached to PO#11-14-228 dtd. 11/27/14, Kimson Commercial				
WITHIN THE COB <u>2014</u> <u>74-10</u> MARCELITO D. MAGTIBAY FEA/BUDGET OFFICER WIDESECTOR				
RIV# 14-10-268 dtd. 10/27/14				
(Amount in Words) ONE THOUSAND SEVEN HUNDRED 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:		APPROVED:		
				
Signature over printed name of Supplier		JOHNNY Y. SYCHUA Regional Vice President Head of Procuring Entity		
<u>12-4-14</u> DATE				
Funds Available :		BRO No.: <u>CGA-14-164-09(MOOE)</u> Amount : <u>P-1,700.00</u>		
 JULIETA L. BARIQUIT, CPA,MBA Fiscal Controller IV				