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: **COMPAÑERO COMMERCIAL**		P.O. No.:	**11-14-230**
Address: L. Jaena Street, Butuan City		Date:	November 27, 2014
Tel/Fax No.: 342-9111		Mode of Procurement:	Local Shopping
Supplier Registered with: **DTI No. 01760**			

Gettlemen :

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

Place of Delivery : **PhilHealth Regional Office - Caraga** — Delivery Term : **15 calendar days**
Date of Delivery : DEC 19 2014 — Payment Term : **on account**

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
				1,608.93
	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 2014 774-10 MARCELITO M. MAGTIBAY FE A. BUDGET OFFICER III			
	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.

APPROVED :

JOHNNY Y. SYCHUA
Regional Vice President
Head of Procuring Entity

CONFORME:

Signature over printed name of Supplier

12-4-14
DATE

Funds Available :

JULIETA L. BARIQUIT, CPA,MBA
Fiscal Controller IV

BRO No.: **CGA-14-164-09(MOOE)**
Amount : **P 1,700.00**