

FORM NO. 001-R

APR FORM revised May 2015

AGENCY NAME PHILIPPINE HEALTH INSURANCE CORPORATION ADDRESS Citystate Center Bldg., 709 Shaw Blvd., Pasig TEL. NOS. 637-3158, 441-7444 local 7674, 7629	AGENCY ACCOUNT CODE X096 AGENCY CONTROL No. APR No. 2016-0008
AGENCY PROCUREMENT REQUEST	
To: PROCUREMENT SERVICE DBM Compound, RR Road Cristobal St., Paco, Manila	
PLEASE INDICATE (X) APPROPRIATE BOX ON ACTION REQUESTED ON THE ITEMS LISTED BELOW <input checked="" type="checkbox"/> Please issue common-use supplies/materials as indicated below Mode of delivery: <input type="checkbox"/> Pick-up (Fast Lane) <input type="checkbox"/> Pick-up (Schedule) <input checked="" type="checkbox"/> Scheduled Delivery on _____ In case fund is not sufficient: <input type="checkbox"/> Reduce Quantity <input checked="" type="checkbox"/> Charge to Unutilized Deposit, APR No.: _____ Date: _____ (* Please verify with PS-Accounting prior to your transaction date)	




PS 1603316

ITEM CODE	ITEM DESCRIPTION/SPECIFICATIONS	RETAIL			AMOUNT
		QTY	UNIT	UNIT PRICE(as of 02/16/2016)	
1 31201502-TA-ED1	TAPE, ELECTRICAL	20	roll	18.20	364.00
2 31201503-TA-M01	TAPE, MASKING, width: 24mm (±1mm)	10	roll	55.12	551.20
3 31201503-TA-M02	TAPE, MASKING, width: 48mm (±1mm)	1	roll	105.04	105.04
4 31201517-TA-P01	TAPE, PACKAGING, width: 48mm (±1mm)	2	roll	33.28	66.56
5 31201512-TA-T01	TAPE, TRANSPARENT, width: 24mm (±1mm)	2	roll	17.37	34.74
6 31201512-TA-T02	TAPE, TRANSPARENT, width: 48mm (±1mm)	2	roll	33.28	66.56
TOTAL ORDERED AMOUNT					1,188.10

17 MAY 2016

FOR THE LATEST PRICES AND DETAILED SPECIFICATIONS, PLEASE REFER TO THE ELECTRONIC CATALOGUE @ www.procurementsservice.gov.ph/www.philgeps.gov.ph
 For verification of balances, call PS-Acctg Division @ Tel. Nos. (02) 563-9351 or email us at accounting@procurementsservice.gov.ph

NOTE: ALL SIGNATURES MUST BE OVER PRINTED NAME

STOCKS REQUESTED ARE CERTIFIED TO BE WITHIN APPROVED PROGRAM: <div style="text-align: center;">  <u>ELY E. ROXAS</u> AGENCY PROPERTY/SUPPLY OFFICER </div>	FUNDS CERTIFIED AVAILABLE: <div style="text-align: center;">  <u>LILIA GARRIDO</u> AGENCY CHIEF ACCOUNTANT </div>	APPROVED: <div style="text-align: center;">  <u>CHERIE CARMEN B. DIVINA</u> AGENCY HEAD/AUTHORIZED SIGNATURE </div>
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FUNDS DEPOSITED WITH PS CHECK NO. _____ IN THE AMOUNT OF: _____ (P. _____) ENCLOSED