


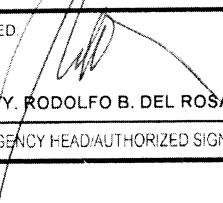


NAME AND ADDRESS OF REQUESTING AGENCY PHILIPPINE HEALTH INSURANCE CORPORATION PRO - 1 EMDC Bldg. Sec. Francisco Q. Duque Jr. Rd., Dagupan City 2400, Pangasinan	AGENCY ACCT. CODE AGENCY CONTROL No. 16-07-016				
AGENCY PROCUREMENT REQUEST					
To: THE PROCUREMENT SERVICE City of San Fernando, <i>Pangasinan</i> <div style="text-align: right;"> <u>1-Aug-16</u> (Date Prepared) </div>					
ACTION REQUESTED ON THE ITEM LISTED BELOW <input type="checkbox"/> Please furnish with us Price Estimate (for office equipment/furniture & supplementary items) <input type="checkbox"/> Please purchase for our agency/furniture/supplementary items per your Price Estimate (PS RAD No. _____ attached) dated _____ <input checked="" type="checkbox"/> Please issue common-use supplies/materials per PS price list as of June 10, 2016 <input type="checkbox"/> Please issue Certificate or Price Reasonableness <input type="checkbox"/> Please furnish us with your latest/updated Price List <input type="checkbox"/> Other (Specify) _____					
IMPORTANT!! PLEASE SEE THE INSTRUCTIONS/CONDITIONS AT THE BACK OF ORIGINAL COPY					
ITEM No.	ITEM AND DESCRIPTION/SPECIFICATIONS/STOCK No.	QTY.	UNIT	Unit Price	Amount
1	Sign Pen, Blue	33	pc	44.01	1,452.33
Ref: PR#16-0406-0265, APR#16-03836 <i>(Continued)</i>		Total	1,452.33		
NOTE: ALL SIGNATURES MUST BE OVER PRINTED NAME					
STOCKS REQUESTED ARE CERTIFIED TO BE WITHIN APPROVED PROGRAM <div style="text-align: center;">  SALLY S. GOMEZ </div>	FUNDS CERTIFIED AVAILABLE <div style="text-align: center;">  EDWARD Q. ESPIRITU </div>	RECOMMENDING APPROVAL <div style="text-align: center;">  MARICAR M. ARZADON, M.D. </div>	APPROVED <div style="text-align: center;">  ATTY. RODOLFO B. DEL ROSARIO JR. </div>		
AGENCY PROPERTY/SUPPLY OFFICER	AGENCY CHIEF ACCOUNTANT	MO VII, Division Chief-MSD	AGENCY HEAD/AUTHORIZED SIGNATURE		