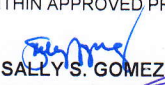
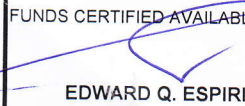
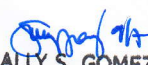



NAME AND ADDRESS OF REQUESTING AGENCY PHILIPPINE HEALTH INSURANCE CORPORATION PRO - 1 EMDC Bldg. Sec. Francisco Q. Duque Jr. Rd., Dagupan City 2400, Pangasinan	AGENCY ACCT. CODE AGENCY CONTROL No. 16-08-23 PS APR No. 16-7467				
AGENCY PROCUREMENT REQUEST					
To: THE PROCUREMENT SERVICE San Fernando City, La Union					
7-Sep-16 (Date Prepared)					
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 August, 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					
REFERENCE	ITEM AND DESCRIPTION/SPECIFICATIONS/STOCK No.	QTY.	UNIT	Unit Price	Amount
	MEDICAL SUPPLIES Alcohol, 500ml	98	bot	47.82	4,686.36
	-nothing follows-				-
Ref: PR#16-0314-0235; CM No, PRO1-2016-0051 CY 2016 ANNUAL PROCUREMENT PLAN [APP] AMENDMENT -BATCH 3		Grand Total : 4,686.36			
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;"> RODOLFO B. DEL ROSARIO JR. </div>		
AGENCY PROPERTY/SUPPLY OFFICER	AGENCY CHIEF ACCOUNTANT	MO VII, DIVISION CHIEF, MSD	AGENCY HEAD/AUTHORIZED SIGNATURE		
<input type="checkbox"/> FUNDS DEPOSITED WITH PS <input type="checkbox"/> _____ CHECK No. _____ IN THE AMOUNT OF: _____ (P _____) ENCLOSED					

By the AUTHORITY OF THE DIVISION CHIEF - MSO:


SALLY S. GOMEZ
 SIO IT/MSO Head

By the AUTHORITY OF THE DIVISION CHIEF - MSO:

MARICAR M. ARZADON, M.D.
 MO VII/DIVISION CHIEF-MSD



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