Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

FOMM-P- 007

JOB ORDER

(Non - Inventoriable Items)

OFFICE/DEPARTMENT: PRO 1

Supplier: BUDS CAR TINT POWER WINDOW AND CAR AIRCON REPAIR
Address: Tanaytay, Alaminos, Pangasinan
Tel/ Fax No.: 9489224551
Supplier Registered with: 931-648-041-000 NV

Work Order No.: 2016-22
Date: 5/18/2016
Term of Payment: Charge
Mode of Procurement: Negotiated Procurement-Small Value Procurement

Please deliver to this office within _____ upon approval of final sample.
Note: Additional ____ working days to submit for approval of text / sample.

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
	2	lots	TINT for glass door	675.00	1,350.00
			xxxxxxxxxxxxxxxxxx nothing follows xxxxxxxxxxxxxxxxxx		
			Less: TAX		
			VAT (3%)		40.50
			PR No. 16-0421-0308	Total - Net of Tax	1,309.50
			Requesting Unit: Western Pangasinan LHIO		

Terms & Conditions:

1. The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
2. If the date of receipt of the Job Order (J.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledged to have been received by a representative either through fax or e-mail.
3. Delivery of the above items shall be made within the prescribed schedule dates. Suppliers are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall be from 8:00AM to 11:30 AM and 1:30pm to 3:00PM during Mon/Wed/Fri (MWF). All item/s shall be delivered and accepted by the Procurement Section at 15th Floor, Room 1503 Citystate Ctr. Bldg. Pasig City.
4. Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
5. Defective, incompatible or non-compliant of goods as to specification when noticed shall be rejected and returned at the time of delivery.
6. In case the series of layout/design presented by the supplier does not satisfy the end-user, the Corporation has the right to cancel the Job Order (JO).
7. Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.

Very truly yours,

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

Certified Budget Available

JOSE A. MONES
Fiscal Controller III

Funds Available in the amount of: 1,309.50

EDWARD V. ESPIRITU
OIC-FMS

APPROVED:

RODOLFO B. DEL ROSARIO, JR.
RVP, PRO1

With in the COB	
Payment Code	
Payee	
Remarks	

Received copy of J.O. on MAY 24 2016
Date

CONFORME:
Signature over Printed Name of Supplier / Representative

INSTRUCTIONS ON HOW TO USE THIS FORM:

1. This form shall be used for the acquisition of services such as printing, renovation, etc.
2. This form shall be accomplished by the staff of the Procurement Section upon decision of the Division Chief & Senior Manager as to which supplier has submitted the lowest quotation and if it had met the required specs.
3. All other terms and conditions stated herein are valid upon completion of signatories of authorized personnel.
4. The budget allocated must be affixed on the PO by routing to the Comptrollership Department upon approval of the PO.
5. This serves the purpose of a contract which shall be the basis of any delivery requirement and payment processing.
6. This form shall be prepared in 3 copies distributed as follows:

1 copy - PRID | 1 copy - Comptrollership Dept. | 1 copy - COA

MAY 24 2016
COA

Received thru e-mail: 5/24/16