

Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION PHILHEALTH REGIONAL OFFICE - XI

Valgosons Building, Bolton Extension, Davac City Telephone Number 295-3382





PURCHASE ORDER

Supplier:	EMCOR INC.					PO NO. 16-01-005 92			
Address:	National Highway, Tagum City					PO Date: JAN. 18, 2016			
Contact No.	655-6257	1				Terms of Payment: 15 days			
X VAT		NON-VAT		TIN: 000-075-476-095		Mode of Procurement: Local Shopping			
				Deliver to this Office wit		eceipt hereof	the follow	ving:	
RIS NO.	Item No.	Qty	Unit		Item Description			Unit Cost	Total Cost
LHIONAB-16-01-006	1		unit	Removal & Re-installation N		S *********	•••	8,500.00	571.26 \$7,968.75
Conditions:									
I				ivalent to 1/10 of 1% of the	total value of undelivere	ed order for eac	ch day of the	e delay as liquidated	damages
2 Render your bills in triplicate copies including the original.									
If the date of the receipt of the P.O. by the dealer is not indicated, it is deemed received on the 10th working day of the approval of the P.O. For imported items, IMPORTANT DOCUMENTS SPECIFICALLY showing the condition(s) and serial numbers of the equipment must be presented upon delivery.									
							- oquipmen	N.W	apon deniory.
Very truly yours, PHRO-XI Budget FY 2016 BRO No					Recommending Approval:			Approved by:	
1162/1		/	Charge to:_	MODE					
ALMALIZA P. ASENTISTA Exp. Code Amount									
SIA II <u>841-00</u> <u>78,500</u>									
					Sa:				
					/ 00			M	
CHRISTOPHER R. MOLINA PATRICK ANGELO L. UY					ATTY. ARNEIL E				
CHIEF-SIO	/		Budget Office	er Designate	Division Chief/MSI	D Head	Regional Vice President		
Received copy of P.O. on FINTE Conformed:									
Received by:	pup	ENT	ENATE		RIBER	FE	PATE		2-12-16
			- 10		Supplier/Represe				Date