



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
PHILHEALTH REGIONAL OFFICE - XI
Valgosons Building, Bolton Extension, Davao City
Telephone Number 295-3382

www.philhealth.gov.ph



PURCHASE ORDER

Supplier: DIGITAL INTERFACE	PO NO. 16-02-026
Address: Pryce Business Park, J.P. Laurel Avenue, Davao City	PO Date: February 1, 2016
Contact No. 221-1256, 224-0871 (fax)	Terms of Payment: 15 working days
<input checked="" type="checkbox"/> VAT <input type="checkbox"/> NON-VAT TIN: 113-000-264-828	Mode of Procurement: Local Shopping

Please Deliver to this Office within 15 working days from Receipt hereof the following:

PR NO.	Item No.	Qty	Unit	Item Description	Unit Cost	Total Cost
1601-06-44	1	1	unit	Scanner, fingerprint (TX628) For LHIO Tagum Posted on GEPS: January 15, 2016 ***** nothing follows ***** 1cc: TX 5. 348.08 1/ 69.62	7,797.00	7,797.00 417.70 <u>7,379.20</u>

Conditions:

- 1 The agency shall impose penalty in an amount equivalent to 1/10 of 1% of the total value of undelivered order for each day of the delay as liquidated damages
- 2 Render your bills in triplicate copies including the original.
- 3 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.
- 4 For imported items, IMPORTANT DOCUMENTS SPECIFICALLY showing the condition(s) and serial numbers of the equipment must be presented upon delivery.

Very truly yours, GARY S. VELAYO Administrative Officer IV	PRO-XI Budget FY 2016 BRO No. _____ Charge to: <u>CAPEX</u> Exp. Code <u>218-20</u> Amount <u>7,797.00</u> PATRICK ANGELO L. UY Budget Officer Designate	Recommending Approval: ARNEL B. SUBIBI Division Chief IV, MSD	Approved by: DENNIS B. ADRE Regional Vice President
Received copy of P.O. on _____		Conformed: ERLINDA T. GUSTILO Senior Account Executive	
Received by: _____		Supplier/Representative _____ Date <u>3/8/16</u>	