



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: <b>SILICON VALLEY COMPUTER GROUP PHILS INC</b>	PO NO. <b>16-02-036</b>
Address: <b>2/F NCCC Mall, McArthur Highway, Matina, Davao City</b>	PO Date: <b>February 5, 2016</b>
Contact No. <b>297-6231</b>	Terms of Payment: <b>15 working days</b>
<input checked="" type="checkbox"/> VAT <input type="checkbox"/> NON-VAT TIN: <b>000-360-191-010</b>	Mode of Procurement: <b>Local Shopping</b>

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
1601-06-34	1	3	units	Facsimile Machine, 4-in-1 (Epson L565) For ORVP, BAS & LHIO Tagum Posted on GEPS: January 14, 2016 ***** nothing follows *****  <div style="text-align: right;"> <i>less: tax 5% 1,874.33</i>  <i>1% 374.87</i> </div>	13,995.00	41,985.00
						<div style="text-align: right;"> <i>2,249.20</i>  <i>\$ 39,735.80</i> </div>

### Conditions:

- 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
- 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.

Very truly yours,

**GARY S. VELAYO**  
Administrative Officer IV

PRO-XI Budget FY 2016

BRO No. \_\_\_\_\_

Charge to: CAPEX

Exp. Code 278-70

Amount \$ 41,985.00

**PATRICK ANGELO L. UY**  
Budget Officer Designate

Recommending Approval:

**ARNEIL B. SUBIBI**  
Division Chief IV, MSD

Approved by:

**DENNIS B. ADRE**  
Regional Vice President

Received copy of P.O. on \_\_\_\_\_

Received by: YANCY D. LEO-AWAN

Conformed: \_\_\_\_\_

Supplier/Representative \_\_\_\_\_

Date 02/19/16