

**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>DAVAO JACSONS' ENTERPRISES</b>	PO NO. <b>16-02-062</b>
Address: <b>Door 3, JBC Building, McArthur Highway, Matina, Davao City</b>	PO Date: <b>February 24, 2016</b>
Contact No.	Terms of Payment: <b>15 working days</b>
<input checked="" type="checkbox"/> VAT <input type="checkbox"/> NON-VAT TIN: 157-451-114-000	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
1601-06-54	1	9	units	Lateral Steel Cabinet, 4-drawer For FMS (8) & MSD (1) Posted on GEPS: January 15, 2016 ***** nothing follows *****  less: tax 5% 4,419.64 1% 883.93	11,000.00	99,000.00  5,303.57 <u>93,696.43</u>

**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,   <b>GARY S. VELAYO</b> Administrative Officer IV	PRO-XI Budget FY 2016 BRO No. _____ Charge to: <u>CAREX</u> Exp. Code <u>299-00</u> Amount <u>P 99,000.00</u>   <b>PATRICK ANGELO L. UY</b> Budget Officer Designate	Recommending Approval:   <b>ARNEIL B. SUBIBI</b> Division Chief IV, MSD	Approved by:   <b>DENNIS B. ADRE</b> Regional Vice President
Received copy of P.O. on _____		Conformed: Supplier/Representative	
Received by: _____		Date <u>March 02, 2016</u>	