

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



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Supplier:	DIGITAL I	NTERFAC	E			PO NO. 16-02-072			
Address:	Pryce Bus	siness Par	rk, J.P. Laure	el Avenue, Davao City		PO Date:	16		
Contact No.	221-1256,	224-0871	(fax)			Terms of Payment:	15 working day	S	
x VAT	☐ NON-VAT TIN: 113-000-264-82				8	Mode of Procureme	Local Shopping		
				er to this Office within		m Receipt hereof th			
PR NO.	Item No.	Qty	Unit	Missless Assess Dai	Item Description		Unit Cost	Total Cost	
1601-06-44	F			Wireless Access Point For ITMS (2) & Like Posted on GEPS: Ja	10 0 1905 (1) anuary 15, 2016	2,340.00	7,020.00		
٧.	v			less:	1/26	7.39 2.68		374.07 \$4.643.93	
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Conditions									
2 Render you3 If the date of	r bills in tripli f the receipt	cate copies of the P.O.	including the object the dealer is	uivalent to 1/10 of 1% of th original. s not indicated, it is deeme SPECIFICALLY showing th	ed received on the 10th	working day of the appro	oval of the P.O.		
PRO-X BRO No Charge Exp. Co				CAYEX Amount 7,020	Recommending	g Approval: Approved by:			
GARY S. VELAYO PAFRICK ANGELO L. UY					ARNEIL B. SUE	ВІВІ	DENNIS B. ADRE		
Administrative Officer IV Budget Officer Designate				er Designate	Division Chief IV	MSD	Regional Vice Pres	sident	
Received by:		on			Conformed: ERLINDAT. Senior Account	t Executive		3/8/16	
1696			1		Supplier/Repres	entative		Date	