

## Republic of the Philippines

## PHILIPPINE HEALTH INSURANCE CORPORATION PHILHEALTH REGIONAL OFFICE - XI

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





PURCHASE ORDER

Supplier:	GH OFFICE DEPOT					PO NO.	16-02-076		
Address:	88A Monteverde Avenue, Davao City					PO Date:	February 29, 2016		
Contact No.	224-5400, 224-2573					Terms of Payment:			
x VAT		NON-VA		TIN: 890-000-074	-144	Mode of Procureme			
				r to this Office within 15 working days from Receipt hereof t		he following:			
PR NO.	Item No.	Qty	Unit		Item Description		Unit Cost	Total Cost	
1602-06-22	1	20	boxes		ding, legal, brown, 100	pcs / box	812.50	16,250.00	
	2	50	pieces	Paste, roll on			6.20	310.00	
116	3	13			ouble-sided with foam		150.00	1,950.00	
1					t of office supplies : February 19, 2016			18,510.00	
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Conditions:									
1 The agency	shall impose	penalty in	an amount eq	uivalent to 1/10 of 1% of	of the total value of undelive	ered order for each day of	f the delay as liquida	ted damages	
2 Render your	bills in triplic	ate copie:	s including the	original.					
3 If the date of 4 For imported	the receipt o	f the P.O.	by the dealer	is not indicated, it is de-	emed received on the 10th	working day of the appro-	val of the P.O.		
4 For imported	items, ivipo	RIANIL	TOCUMENTS	SPECIFICALLY showin	g the condition(s) and serie	al numbers of the equipm	ent must be presente	ed upon delivery.	
Very truly yours, PRO-XI Budget FY 2016					Recommending	Approval:	Approved by:		
			BRO No	ALCOT					
			Charge to:_ Exp. Code	MODE					
			774-10	Amount Place					
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GARY S. VELAYO PATRICK ANGELO L. UY					APNIEU D OU	UDI.	25/11/2 2 4225		
Administrative Officer IV Budge Officer Designate					ARNEIL B. SUB		DENNIS B. ADR		
Received cop		n	Dudgo Office	Sesignate y	Division Chief IV,	WISD RE	egional Vice Presid	ent	
				_		M		1.1.	
Received by:						ASTACIO		3/18/16	
					Supplier/Repres	entative	1	Date /	