

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:	214 PLASTIC TRADING					PO NO. 16-03-080			
Address:	R. Magsaysay Ave., Davao City					PO Date:	March 1, 2016		
Contact No.						Terms of Payment:	15 working day	s	
X VAT		NON-VAT	-11	TIN: 946-522-159-002)	Mode of Procureme		Local Shopping	
IA VIII				er to this Office within 1				zoodi oliopping	
PR NO.	Item No.	Qty	Unit		Item Description		Unit Cost	Total Cost	
PR NO. 1602-06-18				Plastic Cups For PRO XI Posted on GEPS: Fe *********** nothing follows	Item Description		Unit Cost 0.36	Total Cost 3,600.00	
Conditions						<u> </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, PRO-XI Budget FY 2016 BRO No Charge to: M00 = Amount 747-00 Amount					Recommending	g Approval:	Approved by:		
for De					Li	i ∞			
GARY S. VELAYO PATRICK ANGELO L UY					ARNEIL B. SUI	BIBI	DENNIS B. ADRE		
Administrative Officer IV Budget Officer Designate					Division Chief IV.		Regional Vice Pre		
Received copy of P.O. on Conformed:									
Received by:									
					Supplier/Repres	sentative		Date	