

OKI 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



Date

ORDER PURCHASE

Supplier:	PAPERKL	ONE PRIN	TS ATBP.		PO NO.	16-05-124	
Address:	Door 3 Vil	la Fontana	Arcade, Bo	olton Street, Davao City	PO Date:	May 11, 2016	
Contact No.	225-8226				Terms of Payment:	15 working days	3
VAT		NON-VAT		TIN: 941-309-521	Mode of Procureme		Local Shopping
	A	Р	lease Deliv	er to this Office within 15 working days fr	rom Receipt hereof the		
PR NO.	Item No.	Qty	Unit	Item Description		Unit Cost	Total Cost
1603-06-16	1	1	piece	Tarpaulin, 8 feet x 16 feet (RCM backdr	rop)	2,560.00	2,560.00
	2	6	pieces	Tarpaulin, 2 feet x 3 feet (movies)	120.00	720.00	
	3	1	piece	Tarpaulin, 17 inches x 72 inches (text)	170.00	170.00	
	4	1	piece	Tarpaulin, 8 feet x 8 feet (HFPS & Lega	1,280.00	1,280.00	
	5	1	piece	Tarpaulin, 8 feet x 16 feet (IAD backdro	pp)	2,560.00	2,560.00
	6	1	piece	Tarpaulin, 8 feet x 12 feet (fellowship ba	ackdrop)	1,920.00	1,920.00
	7	1	piece	Tarpaulin, 8 feet x 12 feet (Employees I	Forum)	2,560.00	2,560.00
	8	1	piece	Tarpaulin, 5 feet x 8 feet (LMP backdro	p)	1,920.00	1,920.00
	9	2	pieces	Tarpaulin, 6 feet x 2 feet (LMP)		49.00	98.00
	10	1	piece	Tarpaulin, 8 feet x 16 feet (Employers' I	800.00	800.00	
	11	2	pieces	Cintraboard, 2 feet x 5 feet (PMAC)		240.00	480.00
	12	1	piece	Tarpaulin, 8 feet x 16 feet (Employers' I	2,560.00	2,560.00	
	13	2	pieces	Cintraboard, 2 feet x 5 feet (PMAC)		2,300.00	4,600.00
	14	1	piece	Tarpaulin, 6 feet x 8 feet (ICD 10)		960.00	960.00
				For various PRO XI Activities			
1603-06-17	15	5	pieces	Tarpaulin, 6 feet x 3 feet (LMP)		360.00	1,800.00
	16	5	pieces	Tarpaulin, 6 feet x 3 feet (MCP)		360.00	1,800.00
	17	5	pieces	Tarpaulin, 6 feet x 3 feet (ACR)		360.00	1,800.00
	18	5	pieces	Tarpaulin, 78 inches x 33 inches (6.60	per day)	357.50	1,787.50
	19	4	pieces	Tarpaulin, 1.5 feet x 3 feet (Amendmen	nt)	90.00	360.00
	20	4	pieces	Tarpaulin, 1.5 feet x 3 feet (Enlistment)		90.00	360.00
	21	4	pieces	Tarpaulin, 1.5 feet x 3 feet (Profiling)		90.00	360.00
, .	22	2	pieces	Tarpaulin, 1.5 feet x 3 feet (Lunch Pack	k)	90.00	180.00
	23	2	pieces	Tarpaulin, 1.5 feet x 3 feet (Medical Co	onsultation)	90.00	180.00
	24	1	piece	Tarpaulin, 16 inches x 21 inches (MDR	(blow-up)	47.00	47.00
	25	1	piece	Tarpaulin, 16 inches x 24 inches (ID ble	ow-up)	53.00	53.00
	26	1	piece	Tarpaulin, 20 inches x 51 inches (Sama	al Cheque)	142.00	142.00
	27	1	piece	Tarpaulin, 9 feet x 16 feet (Kaputian ba	ackdrop)	2,880.00	2,880.00
	28	1	piece	Tarpaulin, 49 inches x 27 inches (Baba	ak backdrop)	183.75	183.75
	29	1	piece	Tarpaulin, 9 feet x 16 feet (Samal Distr	rict backdrop)	2,880.00	2,880.00
	30	4	pieces	Tarpaulin, 6 feet x 3 feet (Alaga Ka Str	eamer)	360.00	1,440.00
	31	2	pieces	Tarpaulin, 1.5 feet x 3 feet (DSWD food		90.00	180.00
	32	2	pieces	Tarpaulin, 1.5 feet x 3 feet (LCR)		90.00	180.00
	33	2	pieces	Tarpaulin, 3.5 feet x 6 feet (Welcome E	Banner)	420.00	840.00
			-				
Conditions							
	w shall impos	se nenalty in	an amount er	quivalent to 1/10 of 1% of the total value of undelid	vered order for each day of	f the delay as liquidate	d damages
			including the				**************************************

Render your bills in triplicate copies including the original.

Received by:

- 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	Recommending Approval:	Approved by:
	BRO No	p	
	Charge to: MODE AVAUA KA		
	Exp. Code Amount		
	747.828.75		
		1	
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GARY S. VELAYO	PATRICK ANGELO L. UY	ARNEI∳ B. SUBIBI	DENNIS B. ADRE
Administrative Officer IV	Budget Offider Designate	Division Chief IV MSD	Regional Vice President
Received copy of P.O. on		Conformed:	1
Received by:		Cathrine Ann Falledo	May 25, 20/1

Supplier/Representative



Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION PHILHEALTH REGIONAL OFFICE - XI

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





PURCHASE ORDER

Cumulia	DADEDIC	ONE POIN	TC ATDD			PO NO.	16-05-124	
Supplier:	PAPERKLONE PRINTS ATBP. Door 3 Villa Fontana Arcade, Bolton Street, Davao City							
Address		lla Fontana	Arcade, Bo	oiton Street, Davao City		PO Date:	May 11, 2016	
Contact No.	THE RESERVE TO SERVE THE PERSON NAMED IN			TIN 044 000 504		Terms of Payment: 15 working days		
VAT	NON-VAT TIN: 941-309-521 Mode of Procurement: Local Shopping Please Deliver to this Office within 15 working days from Receipt hereof the following:							
PR NO.	Item No.	Qty	Unit	T	Item Description	III Neceipt Hereor the	Unit Cost	Total Cost
1603-06-17		5	pieces	Tarpaulin, 6 feet x 3 fee			360.00	1,800.00
	35	5	pieces	Tarpaulin, 6 feet x 3 fee			360.00	1,800.00
	36	5	pieces	Tarpaulin, 6 feet x 3 fee	The state of the s		360.00	1,800.00
	37	5	pieces	Tarpaulin, 33 inches x	78 inches (NBB)		357.50	1,787.50
				For various Alaga Ka A	Activities			47,828.75
				Posted on GEPS: Mai				
				****** nothing follows	*****			
				lecs bi	7/ 1/12	1 5/1		
				1011-10%	3/. 1,43 1) 479	4.86		
		-		=	1) 479	1.29		1,912,15
					1.			1.913.15 \$ 45,95.60
								\$ 45,95.00
93								
Condition								
Conditions:	v chall imac	e nenalty in	an amount co	uivalent to 1/10 of 1% of the t	total value of undeliner	ed order for each day of t	he delay as liquidated	damages
			including the		total value of underiver		acia, as iiquidated	
				is not indicated, it is deemed	received on the 10th w	vorking day of the approva	al of the P.O.	
				SPECIFICALLY showing the				upon delivery.
			Ι				T	
Very truly yo	ours,			Budget FY 2016	Recommending	Approval:	Approved by	r.
			BRO No	MODE I MLATON KA				
	Charge to: MODE MAKA							
Exp. Code Amount 747, 828-75								
Jan 1					wh			
L MM					/		100	
GARY S. VELAYO PAIRICK ANGELO L. UY				ARNEIL B. SU		DENNIS B. ADF		
Administrative Officer IV Budget Officer Designate Division Chief IV, MSD Regional Vice President							esiaent	
Received copy of P.O. on Conformed:								
Received by: Cathoria Agrip Talleto May 25, 20/le								
Supplier/Representative Date								Date