

**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: PC WORX IT SOLUTIONS INC.	PO NO. 16-05-132
Address: 88 PACHECO BLDG., QUIRINO AVE., DAVAO CITY	PO Date: May 18, 2016
Contact No. 222-0353; 227-3231	Terms of Payment: 15 working days
<input checked="" type="checkbox"/> VAT <input type="checkbox"/> NON-VAT TIN: 232-979-280-003	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	Item Description	Unit Cost	Total Cost
1605-06-09	1	24	cartridges	Ink, T6641, black	245.00	5,880.00
	2	6	cartridges	Ink, T6642, cyan	245.00	1,470.00
	3	6	cartridges	Ink, T6643, yellow	245.00	1,470.00
	4	6	cartridges	Ink, T6644, magenta	245.00	1,470.00
				For replenishment of printing supplies Posted on GEPS: May 4, 2016 ***** nothing follows *****		10,290.00

less: tx 57. 457.38
1/. 91.88

57.26
\$ 9,738.74

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, GARY S. VELAYO Administrative Officer IV	PRO-XI Budget FY 2016 BRO No. _____ Charge to: <u>MOOE</u> Exp. Code <u>774-50</u> Amount <u>\$ 10,290.00</u>	Recommending Approval: ARNEL B. SUBIBI Division Chief IV, MSD	Approved by: DENNIS B. ADRE Regional Vice President
	Received copy of P.O. on _____	Received by: _____	Conformed: Supplier/Representative