

PHILIPPINE HEALTH INSURANCE CORPORATION PHILHEALTH REGIONAL OFFICE - XI

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





PURCHASE ORDER

| Supplier: | PAPERKLONE PRINTS ATBP. | | | | | | PO NO. 16-07-167 | | |
|-------------------------------------|--|----------------|----------------------|--|--------------------|---------------------------------|-------------------------------------|--------------------------|-----------------------|
| Address: | Door 3 Villa Fontana Arcade, Bolton Street, Davao City | | | | | | PO Date: July 7, 2016 | | |
| Contact No. | | | | | | | Terms of Payment: 15 working days | | |
| □ VAT | X NON-VAT TIN: 941-309-521 | | | | | | Mode of Procurement: Local Shopping | | |
| | | | | er to this Office v | | | om Receipt hereof th | | |
| PR NO. | Item No. | Qty | Unit | | | escription | | Unit Cost | Total Cost |
| 1606-13-01 | 1 | 3 | pieces | Tarpaulin (Barh | | | | 270.00 | 810.00 |
| | | 2 | pieces | Tarpaulin (Barh | | | | 432.00 | 864.00 |
| 1606-13-02 | 2 | 6 | pieces | Tarpaulin (Barh | | | | 243.00 | 1,458.00 |
| | | 1 | piece | Tarpaulin (Barh | | 4 feet x b | teet | 432.00 | 432.00 |
| 1606-13-03 | 3 | 5 | places | For the conduct of BarHop Tarpaulin (National Statistics), 4 feet x 9 feet | | 648.00 | 3,240.00 | | |
| 1606-13-03 | 3 | 5 | pieces | For the 27th National Statistics Month | | | 040.00 | 6,804.00 | |
| | | | | | | | | 3,004.00 | |
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| | | | | | (/ | _ | | | 272.16 \$ 6,531.84 |
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| Conditions: | | | Y. aleria | | | | | 130/300 | |
| 1 The agency | shall impos | e penalty in a | an amount eq | uivalent to 1/10 of 1% | of the total valu | e of undelive | ered order for each day of | f the delay as liquidate | d damages |
| 2 Render you | r bills in tripli | icate copies i | including the | original. | | | | | |
| 3 If the date of | f the receipt | of the P.O. | by the dealer | is not indicated, it is o | leemed received | on the 10th | working day of the appro- | val of the P.O. | |
| 4 For importe | d items, IMP | PORTANT DO | OCUMENTS | SPECIFICALLY sho | wing the condition | n(s) and seri | ial numbers of the equipm | ent must be presented | d upon delivery. |
| Von trub | ure | | PPO VIE | Sudget FY 2016 | Poor | mmendin | g Approval: | Approved by | , |
| Very truly yo | urs, | | | Reco | mmenain | g Approvai. | Approved by | • | |
| | | | BRO No Charge to: | MODE | | | | | |
| | | | Exp. Code | 101 | | | | | |
| | | | 767-10 | \$ 6.804.W | | | | | |
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| GAR) 7-1 | | | | | | 6. | | 1 | |
| AND I | | | | | 1 Vh | /h | | | |
| GARY S. VELAYO | | | PATRICK ANGELO L. WY | | | ARNEIL B. SUBIBI DENNIS B. ADRE | | | |
| Administrative Officer IV Budge Off | | | | per Designate Division Chief IV, MSD | | | /, MSD | Regional Vice President | |
| Received co | py of P.O. | . on | | | Conf | omed: | | 1 | |
| | | | | | 14 | Marine | Town a | | 7-23-16 |
| Received by | | | | | | MODE | - Anjung | | |
| | | | | | Supr | lier/Repre | esentatwe | | Date |