

**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: <b>PRINCE EDUCATIONAL SUPPLY</b>	PO NO. <b>16-07-173</b>
Address: <b>132 Bolton Street, Davao City</b>	PO Date: <b>July 7, 2016</b>
Contact No. <b>226-3617, 227-1983, 300-0161 (fax)</b>	Terms of Payment: <b>15 working days</b>
<input checked="" type="checkbox"/> VAT <input type="checkbox"/> NON-VAT TIN: 178-130-560	Mode of Procurement: <b>Local Shopping</b>

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
1605-11-02	1	1	piece	Self Inking Stamp (for OHAT Claims) For BAS	1,046.00	1,046.00
1606-04-02	2	10	pieces	Ballpen, retractable, black	4.00	40.00
	3	10	pieces	Ballpen, retractable, blue	4.00	40.00
	4	10	pieces	Ballpen, retractable, red	4.00	40.00
				For SPU		1,166.00
				***** nothing follows *****		
				<div style="text-align: center;"> less: 2x 57. 52.05        1x 10.41 </div>		<div style="text-align: center;"> 62.42  <u>\$1,103.54</u> </div>

## 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: <u>MOOE</u> Exp. Code <u>974-10</u> Amount <u>\$1,166.00</u>	Recommending Approval:	Approved by:
 <b>GARY S. VELAYO</b> Administrative Officer IV	 <b>PATRICK ANGELO L. UY</b> Budget Officer Designate	 <b>ARNEL B. SUBIBI</b> Division Chief IV, MSD	 <b>DENNIS B. ADRE</b> Regional Vice President
Received copy of P.O. on <u>JUL 23 2016</u> Received by: <u>my</u>		Confirmed: _____ Supplier/Representative	
		_____ Date	