

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



**PURCHASE ORDER**

Supplier: <b>COLUMBIA COMPUTER CENTER DAVAO, INC.</b>	PO NO: <b>16-07-205</b>
Address: <b>City Triangle - CM Recto corner Roxas Avenue, Davao City</b>	PO Date: <b>July 29, 2016</b>
Contact No. <b>221-1475, 221-1678, 226-4222, 221-1474 (fax)</b>	Terms of Payment: <b>15 working days</b>
<input checked="" type="checkbox"/> VAT <input type="checkbox"/> NON-VAT TIN: 005-168-902	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
1605-06-09	1	4	cartridges	Toner, NPG-68 For replenishment of printing supplies ***** nothing follows *****  less: tax 5% 1,099.64 1% 219.93	6,158.00	24,632.00  1,319.57 <u>23,312.43</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,   <b>GARY S. VELAYO</b> Administrative Officer IV	PRO-XI Budget FY 2016 BRO No. _____ Charge to: <u>MOOE</u> Exp. Code <u>774-50</u> Amount <u>24,632.00</u>	Recommending Approval:   <b>ARNEL B. SUBIBI</b> Division Chief IV, MSD	Approved by:   <b>DENNIS B. ADRE</b> Regional Vice President
	Received copy of P.O. on _____  Received by: <u>29/11/16</u>	Confirmed: _____ Supplier/Representative _____ Date _____	