



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: GH OFFICE DEPOT	PO NO. 16-08-225
Address: 88A Monteverde Avenue, Davao City	PO Date: August 17, 2016
Contact No. 224-5400, 224-2573	Terms of Payment: 15 working days
<input checked="" type="checkbox"/> VAT <input type="checkbox"/> NON-VAT TIN: 890-000-074-144	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
1606-06-22	1	4	units	Vacuum Cleaner, heavy duty (Shopvac) For Admin, LHIO Mati & LHIO Tagum ***** nothing follows ***** less: bx 5. 215.20 1/ 172.16	4,820.40	19,281.60 387.36 <u>18,894.24</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, GARY S. VELAYO Administrative Officer IV	PRO-XI Budget FY 2016 BRO No. _____ Charge to: <u>CAPEX</u> Exp. Code <u>278-10</u> Amount <u>19,281.60</u> PATRICK ANGELO L. UY Budget Officer Designate	Recommending Approval: ARNEIL B. SUBIBI Division Chief IV, MSD	Approved by: DENNIS B. ADRE Regional Vice President
Received copy of P.O. on _____		Conformed: Supplier/Representative	
Received by: _____		Date <u>09-08-16</u>	