

PHILIPPINE HEALTH INSURANCE CORPORATION

Regional Health Insurance Office XII

Posadas cor. Abad Santos Sts., City of Koronadal, South Cotabato

Purchase Order

SUPPLIER: CITI HARDWARE

ADDRESS: KORONADAL CITY

P.O. No.: 02-016-16

Date: 2/17/2016

TELEPHONE/FAX NO.:

SUPPLIER REGISTERED WITH:

TERMS OF PAYMENT: C.O.D.

MODE OF PROCUREMENT: Small

same procurement

Please deliver to this office within _____ days from the receipt hereof the following:

QTY	UNIT	ITEM	ITEM/DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
50	MTRS	THHN #12 WIRE	THHN #12 WIRE	21.00	1,050.00
1	UNIT	15 AMPS BREAKER WIT...	15 AMPS BREAKER WITH ENCLOSURE	300.00	300.00
		TAX	WITHHOLDING TAX 1%	-12.05	-12.05
		TAX	VAT 5%	-60.27	-60.27
Total					PHP 1,277.68

CONDITIONS:

1. The Agency shall impose penalty in an amount equivalent to 1/10 of 1 percent of the value 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 this PURCHASE ORDER by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of approval.
4. For imported items, IMPORTANT DOCUMENTS, especially showing of condition, serial number of the equipment purchased, and tax receipts, should be submitted by the supplier.

Funds available in the amount of P 1,350.00

GENLY DE LA VICTORIA AGHOT, CPA
Fiscal Controller
FISCAL CONTROLLER

MERLIE C. SABUG, MPA
DIVISION CHIEF IV

Approved:

MIRIAM GRACE G. PAMONAG, M.D.
REGIONAL VICE PRESIDENT

Received copy of P.O. on 2/23/16
By: _____

CONFORME:

IAN MARK L. HADCAN
PRINT NAME AND SIGNATURE OF SUPPLIER/REPRESENTATIVE