

**PURCHASE ORDER**

Philhealth Regional Office 02

Supplier: <b>ADILYNNE'S GENERAL MERCHANDISE</b>	PO NO. : <u>16-02-0010</u>
Address: <u>36 A. Bonifacio St., Tuguegarao City</u>	Date : <u>2/26/2016</u>
TIN: <u>102-203-746-000 VAT</u>	P. R. NO: _____
Mode of Procurement: <b>Negotiated Procurement - small value</b>	Date : _____

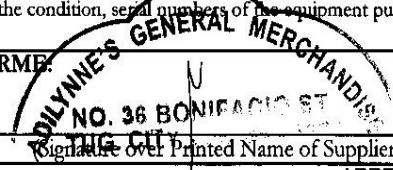
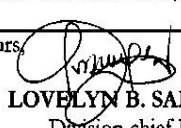
Gentlemen:

Please furnish this office the following articles subject to the terms and conditions contained herein.

Place of Delivery: <u>The Builder's Place, Del Rosario St., Tug. City</u>	Delivery Term: <u>10 days (8:00AM to 5:PM)</u>
Date of Delivery: _____	Payment Term: <u>Credit</u>


Stock #	Unit	Description	Qty	Unit Cost	Amount
M0168	unit	WEIGHING SCALE - Floor Type, with height	1	4,500.00	4,500.00
M0171	unit	VACUUM CLEANER - Heavy Duty, Brand: RUC	1	4,600.00	4,600.00
M0095	unit	PAPER SHREDDER Paper shredder that can shred staples, credit cards and CDs, strip cut, cut at least six (6) sheets for 70gsm paper with a cutting speed of 60mm/sec., auto switch and auto reserve, with motor over	1	12,000.00	12,000.00
F0112	unit	RECORDER - IC Recorder, with complete accessories, Brand/Model: ICD TACC	2	4,200.00	4,200.00
(Total Amount in Words) <b>Fourteen Thousand Eight Hundred Sixty Pesos.</b>					<b>25,300.00</b>

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed. Render your bills in triplicate copies including the original. If the date of receipt of the PO by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of the approval of the PO. For imported items, IMPORTANT DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased and the tax receipts should be submitted by the supplier.

CONFORME:  <u>3-2-16</u> Signature over Printed Name of Supplier	Very truly yours,  <b>LOVELYN B. SABBAN</b> Division chief IV
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APPROVED BY:

  
**OSCAR B. ABADU, JR.**  
Regional Vice President

Funds Available:  <b>KELLY MAE D. CALIMAG</b> Head - Fund Management Section	<table><tr><th>OBJECT OF EXPENDITURES</th><th>AMOUNT</th></tr><tr><td>1. _____</td><td>_____</td></tr><tr><td>2. _____</td><td>_____</td></tr><tr><td>3. _____</td><td>_____</td></tr></table>	OBJECT OF EXPENDITURES	AMOUNT	1. _____	_____	2. _____	_____	3. _____	_____
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3. _____	_____								