Republic of the Philippines

## PHILIPPINE HEALTH INSURANCE CORPORATION

REGIONAL HEALTH INSURANCE CORT ORA REGIONAL HEALTH INSURANCE OFFICE III PhilHealth Bldg., Lazatin Blvd., San Agustin, City of San Fernando, Pampanga General Services Unit (GSU) Healthline (045) 963-0299

## PURCHASE ORDER

Supplier:	WELLCOME CONSTRUCTION SUPPLY	P.O. No.: <b>16-004</b> Date: February 17, 2016
Address:	DOLORES HOMESITE, SAN FERNANDO CITY, PAMPANGA	Term of Payment: 15 days
Tel./ Fax No.:	963-6588	Mode of Procurement: Small Value Procurement
Supplier Registered with:	PHILHEALTH	

Please deliver to this Office within 15 working days from receipt hereof:

NO.	QTY.	UNIT	ITEM / DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
		rolle	Flat coard (150 ft.)	2,622.00	5,244.00
				66.00 38.00	3,300.00 1,900.00
	50	pcs.	Outlet 3 gang		
50	pcs.	Plug	38.00	1,000.00	
			************Nothing Follows**********		
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			the state of the same office of		
			(Purchase materials needed for electrical works at the new office of Branch B in Cabanas N4 Bldg.)		
			PR no.R3-16-071	TOTAL AMT.	PHP 10,444.00

## Conditions:

- 1. The Agency shall impose penalty in an amount equivalent to 1/10 of 1 percent of the 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 receipts of this Purchase Order (P.O.) by the dealer is not indicated, it shall be deemed received within 15 working days from the
- 4. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts, should be submitted by the supplier.
- 5. Delivery shall be made only on MONDAYS to THURSDAYS not later than 3 P.M. except for emergency cases wherein prior notification in such cases shall be given by this office.

Very truly yours,

Certified Budget Available:	Funds available in the amount of	PHP 10,444.00	APPROVED
WILLIEANNE D. CAYACO  Fiscal Controller III  Within the COB: CY2016  Expense Code: 341-00  Budget: Ass (4062-13)  Remarks:	ANGELITA S.REYES  Fiscal Controller IV		Lun: V. TULIAO, CESO V OIC/Vice-Ofesident PRO III 2/

CONFORME:

SIGNATURE OVER PRINTED NAME OF SUPPLIER/ REPRESENTATIVE

DATE RECEIVED COPY OF P.O.

MSD, Division Chief