



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

PhilHealth Regional Office IV-B
Caedo Commercial Center, Calicanto, Batangas City
Healthline (043) 723-8822/ 722-1602/ 300-4342/ 300-3267
region4b@philhealth.gov.ph www.philhealth.gov.ph



Supplier: MT SINAI Refrigeration & Airconditioning Services
Address: Banaba West, Batangas City
Tel. Fax No.: (043) 402-9324 / 0916-425-1569 / 417-0971
Supplier Registered with: _____

Work Order No.: 16-05-04
Date: 5/19/2016
Term of Payment: on account
Mode of Procurement: small value procurement

Please deliver to this office within 10 days upon approval of final sample.
Note: Additional _____ working days to submit for approval of text / sample.

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
1	8	units	General Cleaning of Airconditioning units of PRO IV-B		
2	11	units	Air-conditioning Unit Split Type	845.00	6,760.00
			Air-conditioning Unit Window Type	500.00	5,500.00
			nothing follows		12,260.00
				TOTAL	
			Less: WVAT 5%	547.32	
			EVAT 2%	218.93	
					766.25
			*per PR # 2016-04-25 dated April 21, 2016		
	TOTAL				11,493.75

Terms & Conditions:

- The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
- If the date of receipt of the Job Order (J.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledged to have been received by a representative either through fax or e-mail.
- Delivery of the above item/s shall be made within the prescribed schedule dates. Suppliers are advised to inform General Services Unit at least two (2) days before the delivery. All item/s shall be delivered and accepted by the General Services Unit.
- Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery.
- In case the series of layout/design presented by the supplier does not satisfy the end-user, the Corporation has the right to cancel the Job Order (JO).
- Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.

Very truly yours,

ARACELI J. LAINEZ

DIVISION CHIEF IV - MSD

Certified Budget Available:

Funds Available in the amount of: ₱ 12,260.00

APPROVED:

RICHELE M. CORONEL

CATALINA R. AMATUS

FCIII/Budget Officer Designate

Fiscal Controller IV

PAOLO JOHANN C. PEREZ

REGIONAL VICE PRESIDENT

Date Approved: 5/27/16

With in the COB:

2016 MOOE

Expense Code:

842-10

Bdget:

₱ 12,260.00

Remarks:

OB11# 2016 - 05 - 00 179

Received copy of J.O. on

May 27 2016

Date

CONFORME

PAOLO JOHANN C. PEREZ

Signature over Printed Name

of Supplier / Representative