



Republic of the Philippines  
**PHILIPPINE HEALTH INSURANCE CORPORATION**  
Regional Office IV-B  
Caedo Commercial Center, Calicanto, Batangas City

POMM-P-006

**PURCHASE ORDER**

Supplier: WINDSOR COMPUTER CENTER

Address: # 7 Evangelista Street, Batangas City

Tel.Fax No.: 723-6724

Supplier Registered with: \_\_\_\_\_

PO No. 16-02-04

Date: February 5, 2016

Terms of Payment: on account

Mode of Procurement: small value procurement

Please deliver to this office within 15 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	6	PCS	CD RECORDABLE min 700MB with COVER	19.00	114.00
2	12	CARTS	RIBBON for EPSON LQ300+	130.00	1,560.00
				<b>TOTAL</b>	<b>1,674.00</b>
				Less: WVAT 5%	74.73
				EVAT 1%	14.95
					89.68
<b>TOTAL</b>				reference: Consolidated 1ST quarter supplies for 2016	<b>1,584.32</b>

**Terms & Conditions:**

1. Purchase Order (PO) shall be accepted by the supplier before the delivery of goods and/ or services.
2. NO price increase shall be made by the supplier within seven (7) days from the date of the acceptance of PO.
3. Non-availability of stock shall be made known to PhilHealth before the acceptance of PO.
4. PhilHealth shall have the right to reject and return the items and cancel the corresponding PO if goods delivered are defective, incomplete or non-compliant as specification when quoted.
5. In case of returned/rejected items which cannot be replaced within seven (7) calendar days from notice, PhilHealth shall demand full refund of payment made "in cash" or "in check" three (3) calendar days. Deliveries should be made within office hours on working days on or before the date stipulated in the PO.

Very truly yours,

ARACEL J. GINEZ  
DIVISION CHIEF IV - MSD

Certified Budget Available: Funds Available in the amount of: 1,674.00

RICHELLE M. CORONEL

FC III/Budget Officer Design: 4

CATALINA R. AMATUS

Fiscal Controller IV

With in the COB: 2016 MONTH

Expense Code: 714-50

Bdget: 91,674.00

Remarks: PAID 2016-02-00068

Conforme:

[Signature]  
Signature over Printed Name and Position of Authorized Representative

APPROVED:

PAOLO JOHANN C. PEREZ  
REGIONAL VICE PRESIDENT

Date Approved: 2/9/16

2/11/16  
Date