



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

POMM-P- 006

PURCHASE ORDER

Supplier: ASLAN ENTERPRISES
Address: Taysan, San Jose, Batangas
Tel.Fax No.: 706-1783 / 0932-857-4402
Supplier Registered with: _____

PO No. 16-03-08
Date: March 29, 2016
Terms of Payment: on account
Mode of Procurement: SMALL VALUE PROCUREMENT

Please deliver to this office within 10 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	5	UNITS	FACSIMILE MACHINE *26ppm printing/ 26cpm copying (A4) *24ppm quick duplexing *600dpi print resolution *Up to 19200dpi scan resolution *35-sheet ADF & 250-sheet input tray *2line, 16 digit LCD with white backlight *Super G3 fax with misdial prevention function *WPS key for easy WI-FI set-up	15,450.00	77,250.00
2	5	UNITS	TELEPHONE (BASIC) **nothing follows** Less: WVAT 5% EVAT 1%	545.32 TOTAL 3,570.38 714.08	2,726.60 79,976.60 4,284.46
TOTAL			reference: RIV # 2016-02-11 dated Feb. 9, 2016		75,692.14

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,

ARACELI J. LAINEZ
DIVISION CHIEF IV - MSD

Certified Budget Available: Funds Available in the amount of: \$ 79,976.60

RICHELE M. CORONEL
FC III/ Budget Officer Designate

CATALINA R. AMATUS
Fiscal Controller IV

With in the COB: 2016 CAPEX

Expense Code: 238-36

Bdget: P 79,976.60

Remarks: Order # 2016-03-00193

Conforme:

Signature over Printed Name and Position of Authorized Representative

APPROVED:

PAOLO JOHANN C. PEREZ
REGIONAL VICE PRESIDENT
Date Approved: _____

Date