REPUBLIC OF THE PHILIPPINES

Philippine Health Insurance Corporation 8/F Golden Peak Tower Gorordo Ave. corner Escario Street, Cebu City Tel. No. 233-3287 (Telefax)

PURCHASE ORDER

Supplier:		Acura A	uto Supply P.O. No	P.O. No.: 04-026-2016		
Address: H Corte		H Cortes	St. Subangdaku Mandaue Date	Date: April 22, 2016		
Tel./Fax. No. 236696			Terms of Payment			
Supplier Registered With:			Triode of Trocurement	Mode of Procurement: Small Value Procurement		
Pleas	se delive	r to this o	office within 30 days from receipt hereof the following:			
NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT	TOTAL	
			THEM DESCRIPTION	PRICE	AMOUNT	
	4	pcs	Interior Tire (250 x 17)	280.00	1,120.00	
	4	pcs	Interior Tire (275 x 17)	300.00	1,200.00	
L	4	pcs	Fuel Filter	45.00	180.00	
<u> </u>	4	pcs	Break Shoe (rear)	750.00	3,000.00	
[11	pcs	Carburator set (for TMX 155)	3,800.00	3,800.00	
	1	pcs	Break Cable for (TMX 155)	450.00	450.00	
	e care ar hiller and a	gradic employed	and the same of th		9,750.00	
			FN participales	T		
				1		
			379781			
BUDG	SET SECT					
OB		m.F	AMT OTTO			
		TOTAL	<u> </u>			
*						
Аррго	oved by:	JOSE	TTE E. BACALSO, FC IV 4. 27 · 14			
			NATED BUDGET OFFICER			
	itions:		•			
1. Th	e agenc	y shall im	pose penalty in an amount equivalent to 1/10 of 1 percent of the total	al value of undeli	vered	
			of the delay as liquidated damages.			
			triplicate copies including the original.			
			t of the P.O. by the dealer is not indicated, it shall be deemed receive	ed on the 10th da	v from	
			eval of the P.O.	a on the roth da	y nom	
				alidiaa assist	1	
7. I'U the	equinm	ent nural	ms, IMPORTATION DOCUMENTS specifically showing the cornased, and tax receipts, should be submitted by the supplier.	idition, serial nui	moers of	
ti i Ç	- cquipii	ent purci	nasou, and tax receipts, should be submitted by the supplier.			
Fund	sAyaila	ble in the	e amount of:			
1.				Very truly you	rs.	
	1 mi				,	
1	MMM			Matty. Gerar	lo S. Ortiz	
Jøse	rte E. B	acalso	PR No. 16-04309, Dated :April 19, 2016	Division Ch	io S. Ortiz ief IV - MSD	
Fiscal	Contro	ller IV	Requested by: J. Diviangracia, SIO III	, =		
_ }	Prepared	by:		Approved:		

Regional Vice President

Printed Name & Signature of Supplier/Representative

SLAN

CONFORME:

SIO III

Received copy of P.O. on: