HILIS INE HEALTH INSURANCE CO
PHILHEALTH REGIONAL OFFICE VIII
PhilHealth Building 2, Burgos St., Tacloban City, Leyte
Tel. Nos. (053) 523-8283; 325-3563

actions of directors or employees or create the appearance of a conflict of interest.



Address TACLOBAN CITY							Job Order No.:			
Tel. Fax	. No.	(053) 321-	8828; 325-2222						2/16/2016	
Supplier	r Registere	ed with:			-					
						Mode of	Procurement:			
	Please d	eliver to thi	s office within	5 ds	upon appro	val of the foll	owing.			
NO.	QTY	UNIT		SEDVIV	CE DETAILS	4				
		The state of the s		SERVIC	LE DETAILS		Not the last	UNIT	TOTAL	
			PERIODIC PREVENTIVE	MAINTENANCE	OF TOYOTA HI-L	UX SHY 902		PRICE	AMOUN	
	1	lot	Scope of Work: (mate	rials and labor)		0.0000	\$ 9 P	3,431.99	3,431.9	
			Periodic Check-up					3,102.00	3,131.3	
			Change oil and oil filte	r replacement					_	
1.2		xxx nothing follows xxx							-	
		8 8					2			
								*		
		A						2		
			B 10 × 2							
								*		
			7. T							
	LESS:							3,431.99		
					FWVAT	5%	153.21			
					EWT	2%	61.29		214.50	
	2 100								3,217.49	
			RIV # 16-02-032 DTD 02	2/12/2016						
rms &	Conditio	ns:								
The agenc	y shall impose	e penalty in an ar	nount equivalent to 1/10 on one (1	%) percent of the total v	alue of undelivered order	for each day of dela	av as liquidated dan	2705		
i the date	of the receip	t of the Job orde	(JO) by the dealer is not indicated	it shall be deemed recei	ved on the day it was ack	nowledge to have b	een received by a r	epresentative eith	ner	
o u.B.i. iu	X Of C Illali.									
Delivery of	the above ite	em(s) shall be ma	de within the prescribed schedule	dates. All item(s) shall be	delivered and accepted b	y the GSU at PhilHe	ealth Building 2, P. E	Surgos St., Tacloba	an City	
content in	ccipt and sai	es invoice shall b	e required for one-time complete of	lelivery of the goods						
	cting parties	indertake to con	t of goods as to specification when	quoted shall be rejected	and returned at the time	of delivery. With p	rovision for a back-	up unit in case of	repair.	
he contra	cuilg parties i									

Very truly yours, DERWIN WENDELL SUPREMO O IV/OIC, MSD Certified Budget Available Funds Available in the amount of:-APPROVED: BENJAMIN N. GABRIELES, JR. LEVIE C. VILLEGAS Fiscal Examiner A Fiscal Controller III WALTER R. BACAREZA Within COB: Regional Vice President Expense Code: 847-00) Date Approved: Budget: Remarks: Received copy of JO:

CONFORME: