

REPUBLIC OF THE PHILIPPINES
Philippine Health Insurance Corporation
National Capital Region & Rizal Group

10th Floor, Sunnynede IT Centre Bldg, 1614 Brgy. South Triangle, Quezon Ave., Quezon City
 Telefax: 441-2579

PURCHASE ORDER

Supplier: MAITILINK SYSTEMS, INC. P.O No.: NCRP-16-03-016
 Address: Unit 401 UnLad Condo cor. Gen. Malvar St., Taft Ave., Malate Manila Date: March 28, 2016
 Tel.Fax No.: 526-2120 Term of Payment: 15 Working Days
 Supplier Registered with _____ Mode of Procurement: Shopping

Please deliver to this office within 5 working days from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	59	units	Flash / Thumb drive, 64 Gig Thumb Drives	1,100.00	64,900.00
2	10	units	Flash / Thumb drive, Low Capacity Storage	275.00	2,750.00
					67,650.00
			Less:		
			EWT 1% :	604.02	
			FVAT 5% :	3,020.09	
					3,624.11
			Net Amount:		64,025.89
			PR #:		
			16-0107-NCR-P dtd 01/19/16		

Conditions:

1. The supplier shall strictly comply with the terms of reference or specifications prescribed by the Corporation.
2. The Corporation shall impose penalty in an amount equivalent to 1/10 of 1 percent of the total value of undelivered order for each day of the delay as liquidated damages.
3. Render your bills in triplicate copies including the original.
4. If the date of receipt of the P.O. by the dealer is not indicated, it shall be deemed received on the 15th Working day from the date of the approval of the P.O.
5. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts, should be submitted by the supplier.

Very truly yours,

DIODE G. LANTORIA

OIC, Management Services Division, PRO NCR

Certified Budget Available: JOEL P. SANTOS Designated Budget Officer	Funds Available in the amount of: Php67,650.00 MARICEL J. MAGLALANG Fiscal Controller IV	APPROVED: DENNIS S. MAS, Ph. D URP Vice President - PRO NCR (or Authorized Representative)
Within the COB: <u>2016</u> Expense Code: <u>7850</u> Available Budget: <u>967,650</u> Remark: <u>Per 202 J. 2015</u>	Received copy of P.O on _____	CONFORME: <u>04-7-16</u> <u>Conrado P. Cosodios Jr.</u> Print Name and Signature of Supplier/Representative