

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

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

**PURCHASE ORDER**

Supplier: ZOJO REFRIGERATION AND AIR CONDITIONING SERVICES P.O No.: NCRP-16-06-013  
Address: 3323 H. Carlos Bldg., Jennys Avenue, Rosario, Pasig City Date: June 15, 2016  
Tel.Fax No.: 570-3794 Term of Payment: 15 Working Days  
Supplier Registered with SEC Mode of Procurement: Small Value Procurement  
Please deliver to this office within 5 working days from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	1	Lot	Repair of one (1) unit EZ Air Floor Mounted Type Airconditioning Unit; PN: NCR-AP-10-00036; LHIO Caloocan		15,500.00
			Less:		15,500.00
			EWT 2% : 276.79		
			FVAT 5% : 691.96		968.75
			Net Amount:		14,531.25
			PR #:		
			16-0471-NCR-N dated May 26, 2016		

**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: Funds Available in the amount of: Php15,500.00		<b>APPROVED:</b>  <b>CYNTHIA P. CAMACHO, M.D</b> OIC - PRO NCR (or Authorized Representative)
 <b>JOEL P. SANTOS</b> Designated Budget Officer	 <b>MARICEL J. MAGLALANG</b> Fiscal Controller IV	
Within the COB: <u>2016</u> Expense Code: <u>807-00</u> Available Budget: <u>15,500.00</u> Remark: <u>Printed 2016 2015</u>	Received copy of P.O on <u>July 17 2016</u>	<b>CONFORME:</b>  Print Name and Signature of Supplier/Representative