

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: MAINTENANCE OF AIRCONDITIONING & REFRIGERATION (MARCO)
CO., INC. P.O No.: NCRP-16-06-015
Address: Marco Bldg., 12 Matatag St., brgy. Pinyahan, Diliman, QC Date: June 21, 2016
Tel.Fax No.: 922-3504 Term of Payment: 15 Working Days
Supplier Registered with SEC Mode of Procurement: Small Value Procurement

Please deliver to this office within _____ as scheduled _____ from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	1	Lot	Repair of Defective Aircon Koppel, 5TR Floor Mounted, PN: 00-1113OE0402002 / 4th floor/ Collection Section/ NCR North		47,700.00
			Less:		47,700.00
			EWT 2% : 851.79		
			FVAT 5% : 2,129.46		2,981.25
			Net Amount:		44,718.75
			PR #:		
			16-0454 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, _____

LELANIE S. ZAMORA
OIC – Management Services
Division _____

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Certified Budget Available:	Funds Available in the amount of: Php47,700.00	APPROVED:
<u>JOEL P. SANTOS</u> Designated Budget Officer	<u>MARICEL J. MAGLALANG</u> Fiscal Controller IV	<u>DENNIS S. MAS, Ph. D URP</u> Vice President - PRO NCR (or Authorized Representative)
Within the COB: <u>2016</u>	Received copy of P.O on	CONFORME: _____
Expense Code: <u>8120</u>	<u>July 13, 2016</u>	Print Name and Signature of Supplier/Representative
Available Budget: <u>Php 47,700.00</u>		
Remark: <u>first 200000</u>		