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	то	TOYOTA MAKATI INC		P.O No.: NCR-	NCR-16-08-003	
Address: Ayala Corner Metropolitan Ave., M				Date: Augus	t: 15 Working Days	
	Cel.Fax No.: 897-0000 loc 110			Payment: 15 Wor		
Supplier Registered with SEC				urement: Small Valu		
			ffice within as scheduled fro	m receipt hereof th	e following	
NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT	
1	1	Lot Preventive Maintenance - Change Oil / Replacement of Brake		f Brake	7,486.00	
					7,486.00	
	*		Less: EWT 2%: 133.68 FVAT 5%: 334.20	Net Amount:	467.88 7,018.12	
					1	
			PR #:			
			16-0629-NCR-P dtd July 26, 2016			
2. The Gorden 3. Rend 4. If the day 1	supplier s Corporat r for each der your l e date of from the imported	ion shall I day of the bills in tri receipt of date of the items, IN	thy comply with the terms of reference or specifications prescrimpose penalty in an amount equivalent to 1/10 of 1 percent of the delay as liquidated damages. plicate copies including the original. the P.O. by the dealer is not indicated, it shall be deemed rece approval of the P.O. IPORTATION DOCUMENTS specifically showing the conditional tax receipts, should be submitted by the supplier.	eived on the 15th Wor	-king	

Very truly yours, DIODE G. LANTORIA OIC, Management Services Division, PRO NCR Certified Budget Available: Funds Available in the amount of: Php7,486.00 APPROVED; en les CHERYL W. PEÑA JOEL P. SANTOS OIC - PRO NCR Fiscal Controller IV Designated Budget Officer (or Authorized Representative) Within the COB: CONFORME: Received copy of P.O on **Expense Code:** JOSEPH Available Budget Print Name and Signature Remark of Supplier/Representative