## 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**

Suppli	er: IN	DUSTRIA	L & TRANSI	ORT	FOUR	CHA;	SE ORI	DER					
Supplier: INDUSTRIAL & TRANSPORT EQUIPMENT, INC  Address: 1669 Quezon Avenue cor Sat Esquere St. W. T.									P.O No.:	.:NCR-16-08-010			
	Address: 1669 Quezon Avenue cor Sgt Esguerra St., West Triangle, QC  Tel.Fax No.: 926-7111									: August 18, 2016			
Supplie	er Register	ed with	SE	SEC / Philgeps					Term of Payment		: 15 Working Days		
Please	deliver to	this offi	ce the service					Mode of P	Mode of Procurement:		ue Procuremen		
			The service	ne service as scheduled					from recei		pt hereof the following		
NO.	QTY	UNIT			ITE	M DES	CRIPTION			UNIT PRICE	TOTAL		
1	1	Lot	Under Cha	Under Chassis Repair of Service Vehicle SGZ 678 (includin labor and parts)						TRICE	60,140.18		
			Less:								60,140.18		
			EW		2%:		1,073.9	3					
		-	FVA	Т 5	5%:		2,684.83	3			3,758.76		
		ļ.	D #						Ne	t Amount:	56,381.42		
		-	PR#:	datad	F.1.17.01								
	onditions:												
order for 3. Render 4. If the diday from 5. For imp	or each day your bills ate of rece the date ported item	y of the de in triplica cipt of the l of the app as, IMPOR	omply with the see penalty in ar lay as liquidate te copies included. P.O. by the deal proval of the P.O. TATION DOC ax receipts, show	d dam ling th er is n	nages.  not indica	l. ted, it sl	nall be dee	med received of	otal value of	f undelivere Working	d		
								ruly yours,	ODE G. L.	ANTORIA	Oha/		
Certific	Certified Budget Available: Funds Available in the amount of: Php60,140.18										vices Division, PRO NCR		
<b>JC</b> Desig		MARICEL J. MAGLALANG  Fiscal Controller IV					ANICET OIC - PH	ARPROVED:  Confact  ICETA T. CERTEZA, M.D  C-PRO NCR 6178/16					

Received copy of P.O on

B-30-14

(or Authorized Representative)

Print Name and Signature of Supplier/Representative

CONFORME:

WILLIAM

847-00

Pront 70025 2W

P60,40.18

Within the COB:

Available Budget:

Expense Code:

Remark