## 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**

P.O No.:

NCRP-16-10-007

of Supplier/Representative

10

ADVANCE MICROSYSTEMS CORPORATION

Supplier:

	Un	it 1104-E	PSF Tel	tite Tower	Evolune	- Part O	· · · · · · · · · · · · · · · · · · ·		P.O No.;	NCRP	-16-10-007	
Address: Antonio Pasig City												
Tel Fax No : 365-4181									Date:			
	r Registere			SEC /	Philagens Term of Paymen							
Mode of Procureme								curement:	ent: Small Value Procurement			
Please deliver to this office within					15 working days from recei					pt hereof the following		
NO.	QTY	UNIT		ITEM DESCRIPTION						UNIT PRICE	TOTAL AMOUNT	
1	4	units		PROJE(	CTOR, M	1ultimedi	ia, for large a	area/outdooi	r	100,000.00	400,000.00	
			,								400,000.00	
			Less:	EMIG								
		1 /	1	EWT	1%:		3,571.43					
		1 1		FVAT	5%:		17,857.14				21,428.57	
									No.	et Amount:	378,571.43	
			PR #:								070,071110	
Conditio			16-0572-	-NCR-P date	ed august 2	6, 2016						
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												
Certif	fied Budg	et Availa	hle	Funds Ax	vailable is	OIC, Management Servi						
JOEL P. SANTOS  Designated Budget Officer  Within the COB: Expense Code:  Expense					MARICE MAGUALANG  Fiscal Controller IV  Received copy of P.O on CONFOR							
emark:				かんかみ					Mi dyc Print N	Name and Sig	nature	