

# PURCHASE ORDER

Supplier	: <b>CROWN PAPER &amp; STATIONER</b>
Address	: <b>AGUINALDO ST. ILIGAN CITY</b>
Tel/Fax	:
RIV No.	: <b>336-18, 397-18 &amp; 398-18</b>
Date	: <b>May 29, 2018, &amp; June 19, 2018</b>

Purchase Order No. : 18-140  
Date : 12-Jul-18  
Terms of Payment : \_\_\_\_\_  
Mode of Procurement : \_\_\_\_\_

Please deliver to this Office within **seven (7)** working days from receipt hereof the following:

NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	1	LOT	RIZOGRAPH COPY 2SIDED PRINT 500'S		-
			SUB-20 70gsm		-
	6	reams	LONG SIZE , 2306 BIR forms (Back to Back)	435.00	2,610.00
	6	reams	LONG SIZE , 2307 BIR forms (Back to Back)	435.00	2,610.00
	10	reams	A4 SIZE , PhilHealth Citizens Charter (Information Materials)	305.00	3,050.00
	12	reams	A4 SIZE , Supervisor FOCCIs	305.00	3,660.00
			6 Supervisor PAGES FOCCIs FORM X (2REAMS EACH PAGES)		
	16	reams	A4 SIZE , Subordinate FOCCIs	305.00	4,880.00
			PAGES Subordinate FOCCIs FORM X (2REAMS EACH PAGES)		
	6	reams	A4 SIZE , Client FOCCIs	305.00	1,830.00
			3 PAGES Client FOCCIs FORM X (2REAMS EACH PAGES)		
	8	reams	A4 SIZE , PEER FOCCIs	305.00	2,440.00
			4 PAGES PEER FOCCIs FORM X (2REAMS EACH PAGES)		
	2	reams	A4 SIZE , Customer Satisfaction Survey Sheet	305.00	610.00
	7	reams	A4 SIZE , Philhealth External Customer Feedback Sheet	305.00	2,135.00
	7	reams	A4 SIZE , Philhealth Internal Customer Feedback Sheet	305.00	2,135.00
			XXXX NOTHING FOLLOWS XXXXXX		
TOTAL					25,960.00

1. The Agency shall impose penalty in an amount equivalent to 1/10 of one (1) percent of the total value of undelivered order for each day of the delay as liquidated damages.
2. Render your bills in triplicate copies including the original.
3. If the date of the receipt of the Purchase Order by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of the approval of the Purchase Order.
4. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts, should be submitted by the supplier

Funds available in the amount of: ₹ 20,000/-

Very truly yours,

**SORAYAH M. SHARIEF-TABAO**

Head, Fund Management Section

**ALLANODEN A. MACARIMBANG**

Chief, Management Services Division

Approved:

Attv. KHALIOUZZAMAN M. MACABATO, CPA, CSEE

Regional Vice-President

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