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	REPUBLIC OF THE F	HILIPPINES	
	Philippine Health Insura		
	709 CityState Ca Snaw Blvd. Brgy. Orar	——————————————————————————————————————	
	Telefax No. 637-31:		
	PURCHASE C	ORDER	
Supplier MOI	ANJO ENTERPRISES	Purchase Order No.:	04-011-19
	odu St., Paep, Manila	Date:	April 30, 2019
Tel.fax No.: 559-61. Supplier Reg 3	PHILHEALTH	Term of Paymont: Mode of Procurement:	On Account Small Value Procurement
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	this office within 7 working days		reof the following
NO. QTY U	ITEM DESCRIPTION	ON	UNIT TOTAL PRICE AMOUNT
1 9 pc	s. FRAME, size 8 x 11 Inches		1,200.00 10,800.0
			40.000
			10,800.0
	LESS: EWT	1% 96.43 /	
	GMP	5% 482.14 /	578.5
			30.001.4
1 l i l			10,221.4
	PR #		10,221.4
	PR # 19-0009 dtd. 02/01/19 Compitaliership		10,221.4
Town 6 17 and the name			10,221,4
*	19-0009 dtd, 02/01/19 Complitationship use penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of und	
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t. The agency shall imp of the delay as liquid 2. If the date of receipt have been received	19-0009 dtd, 02/01/19 Compitaliership ose pencify in an amount equivalent to 1/10 on one (ated damages, of the Purchase Order (P.O.) by the dealer is not indic by a representative either through fax or e-mail	ated, it shall be adomod received on	ellvared order for each day the day it was acknowledge
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