

REPUBLIC OF THE PHILIPPINES
Philippine Health Insurance Corporation
National Capital Region
 3rd flr. 68 VCP Kalayaan Bldg. #68 Kalayaan Ave., QC
 Telefax: 441-2579

PURCHASE ORDER

Supplier: PBT TECHNOLOGY SOLUTIONS INC **P.O No.:** NCR-P-19-08-004
Address: Unit 208 SGC Bldg. 3615 Davila St. Brgy. Lapaz Makati City **Date:** August 13, 2019
Tel.Fax No.: 886-4943 **Term of Payment:** Government Terms
Supplier Registered with Philgeps **Mode of Procurement:** Shopping

Please deliver to this office within 15 working days from receipt hereof of the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	50	Pcs	MARKER, Metallic Silver, Big	100.00	5,000.00
2	50	Reams	PAPER BOND, Multicopy, 80gsm, A3	400.00	20,000.00
			Less:		25,000.00
			EWT 1% :	223.21	
			FVAT 5% :	1,116.07	1,339.28
			Net Amount:		23,660.72
			PR #:		
			19-0281-NCR-P dated June 21, 2019		

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Conditions:

- The supplier shall strictly comply with the terms of reference or specifications prescribed by the Corporation.
- 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.
- Render your bills in triplicate copies including the original.
- If the date of receipt of the J.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 J.O.
- 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

By the authority of the OIC-MSD, PRO NCR
 Mancel J. Magalang

[Signature] 8/15/19
LELANIE S. ZAMORA

Head, Admin. Services Section

Certified Budget Available: <i>[Signature]</i> 8/16 JOEL P. SANTOS Designated Budget Officer		Funds Available in the amount of: Php25,000.00 <i>[Signature]</i> 8/16 WILLIE M. BUMACOD OIC-Section Chief, Fund Management Services		APPROVED: <i>[Signature]</i> 8/16 GILDA SALVACION A. DIAZ Vice President - PRO NCR (or Authorized Representative)	
Within the COB: <u>2019</u> Expense Code: <u>Revenue 1111-100-1001-100</u> Available Budget: <u>₱ 25,000.00</u> Remark: <u>Para sa 2019</u>		Received copy of J.O on _____		CONFORME: <i>[Signature]</i> 8/16/19 Print Name and Signature of Supplier/Representative	