Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

REGIONAL HEALTH INSURANCE OFFICE III PhilHealth Bldg., Lazatin Blvd., San Agustin,

City of San Fernando, Pampanga General Services Unit (GSU) Healthline (045) 963-0299

PURCHASE ORDER

	ORCHIDS BOOKSTORE	P.O. No.:	21-017
Supplier:		Date:	May 25, 2021
Address:	Sto. Rosario, Angeles City	Term of Payment:	15 DAYS
Tel./ Fax No.:	0454090174	Mode of Procurement:	Small Value Procurement
Supplier Registered v	with: PHILHEALTH		

Please deliver to this Office within 15 working days from receipt hereof:

NO.	QTY.	UNIT	ITEM / DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	10	pcs	SELF-INKING STAMP Trodat Printy 5460 with rubber inscription	2,580.00	25,800.00
			**************Nothing Follows**********		
			R3-2021-05-001	TOTAL AMT.	PHP 25,800.00

Conditions:

- 1. The Agency shall impose penalty in an amount equivalent to 1/10 of 1 percent of the 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 receipts of this Purchase Order (P.O.) by the dealer is not indicated, it shall be deemed received within 15 working days from the.
- 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.
- Delivery shall be made only on MONDAYS to FRIDAYS at 8AM. except for emergency cases wherein prior notification in such cases shall be given by this office.

Very truly your PRO3 SBAC - Head

Certified Budget Available:	Funds available in the amount of / PHP 25,800.00	APPROVED
OV.		Firm
EVELYN C. CO	LEONIDAS A. LUMBA	EDGARDO F. FAUSTINO
FC III / Comptrollership Unit	FC IV / Fund Management Section	Acting Vice President PRO III
Within the COB: Expense Code: Budget: Remarks:		
CONFORME:		
Awnan Kytfel A	ω	June 10, 2021

SIGNATURE OVER PRINTED NAME OF SUPPLIER/ REPRESENTATIVE

DATE RECEIVED COPY OF P.O.