

#### Republic of the Philippines

## PHILIPPINE HEALTH INSURANCE CORPORATION

### PhilHealth Regional Office - ARMM

Kouzbary Businness Complex, Ali Bin abu Talib St., New Capitol Heights, Marawi City Cell Phone No. 09285071910; Fax No. 09209372263

# **PURCHASE ORDER**

Supplier	:	ILIGAN DATAVISION SALES CENTER		Purchase Order No. :	2121-200
Address	:	Iligan City		Date :	11/4/2021
Tel/Fax	:	128-731-686-000		Terms of Payment :	(7)
PR No.	:	PU-003-2021	All The Man	Mode of Procurement :	LOCAL SHOPPING
Date	: -	August 26, 2021			

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

NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUN
1	1	unit	Weatlphone Prof-Type, HPM1000 (IM MAN)	6,890.00	6,890.00
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				TOTAL	6,890.0

#### **Conditions:**

- 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

Funds available in the amount of:		Very truly yours,
ASLINAH D. ASHARY Head, Fund Management Section		ALLANODEN A. MACARIMBANC Chief, Management Services Division
Approved:	_0,2	I has the same of the

DATU MASIDING M. ALONTO, JR. Regional Vice-President

Received this P.O. Copy on:		Confor