

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	:	LOMEX CAR TIRES AND ACCESSORIES	Purchase Order No. :	2112121
Address Tel/Fax PR No. Date	:	Tubod Highway, Iligan City 223-1208	Date : Terms of Payment :	1411 - 04
	:			- MILIAN
		GSU-141-2021		LOCAL SHOPPING
		November 4, 2021		
Please del	iver t	to this Office within seven (7) working days from receipt hereof the following:		

NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUN
1	/4	pcs	TUKE 225/70 R15	4,500.00	18,000.00
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	1			TOTAL	10,000,00
				TOTAL	18,000.00

- 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

and tax receipts, should be submitted by the supplier	the equipment purchased,
Funds available in the anguint of:	Very truly yours,
ASLINAH D. ASHARY Head, Fund Management Section	ALLANODEN A. MACARIMBANG Chief, Management Services Division
Approved: \ _ \ \ _ \ \ \ _ \ \ \ \ \ _ \ \ \ \	
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Regional Vice-President

eceived this P.C	O. Copy on:	Conform:
	by:	GA
		Name and Signature of