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Palao, Iligan City

## 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 No.

Date

## **PURCHASE ORDER**

Tel/Fax	:	221-018	9	Terms of Payment	: /
PR No.	:	HRU-044-2021		Mode of Procurement:	LOCAL SHOPPING
Date	:	Novemb	per 5, 2021		
Please de	liver to	this Offic	ce within <b>seven (7)</b> working days from receipt hereof the following:		
NO.	IOTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUN
1	QTY.	pc	TARP BACKDROP 6x8, for the conduct of Training on	1,200.00	1,200.00
1	1	рс	Supervisory Development Course Track 11 on September	1,200.00	1,200.00
	-		20-24, 2021 at a venue within Marawi City		
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W.				TOTAL	1,200.00
the delay 2. Rende 3. If the date of th 4. For intax receip	gency s as liquid r your b date of t e appro- aported bts, shou	hall impodated darills in tri the receip val of the items, IM ld be sub in the an	plicate copies including the original.  In of the Purchase Order by the dealer is not indicated, it shall be deed a Purchase Order.  MPORTATION DOCUMENTS specifically showing the condition, sometical by the supplier  Mount of:  Very truly	med received on the 10th we serial numbers of the equipment yours.	orking day from the nent purchased, and
	10000	197 11	D./ASHARV nagement Section Approved:	ALLANODEN A. M Chief, Management S	

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

Conform: