

*Republic of the Philippines*  
**PHILIPPINE HEALTH INSURANCE CORPORATION**  
 City State Center 709 Shaw Boulevard, Pasig City  
 Healthline 637-9999  
[www.philhealth.gov.ph](http://www.philhealth.gov.ph)

**Philhealth Circular**

No. 49 s. 2009  
*TS*

**TO: ALL PHILHEALTH REGIONAL, BRANCHES,  
 SERVICE AND DESK OFFICES, HEALTH CARE  
 PROVIDERS, COMPTROLLERSHIP DEPT AND  
 OTHERS CONCERNED**

**SUBJECT: Official receipt issued by DBP as part of PhilHealth's  
 acceptable official receipt**

In line with PhilHealth's thrust to bring its services closer to OFWs, DBP remittance Center HK Ltd., a subsidiary branch of DBP in Hong Kong was accredited by PhilHealth. DBP started collecting premium contributions from our OFW members in Hong Kong last August 4, 2009. DBP and its tie-ups abroad issues its own official receipts to paying OFW/OCW members as proof of their premium contribution for a certain applicable period. Said receipts should be honored, for purposes of benefit availment or contribution verification.

Below is a copy of the official receipt.

DBP REMITTANCE CENTRE HK LTD  
 Shop 214, 2/F World Wide Plaza  
 19 Des Voeux Road, Central, Hong Kong  
 Tel # (852) 2530-9138, (852) 2537-4708

*Office Copy*  
**PHILHEALTH CONTRIBUTION**

SENDER  
 Name : DELA CRUZ, JUAN A.  
 Address : BLOCK 47, ROOM 1103, 100 SHING TAI RD.,  
 HENG FA CHUEN, CHAI WAN, HONG KONG

Tel No : 689-XXXX

BENEFICIARY  
 Name : PHILHEALTH  
 Address : PIN: 19-XXXXXXXXXX-X  
 APPLICABLE PERIOD: 092009-082010

Zip :  
 Tel No :

Teller : TANYA



**OFFICIAL RECEIPT  
 NO. WWH119110**

Date : SEP 13 2009  
 Time : 18:34:31  
 ID No. : W871730(9)  
 Passport : QQXXXXXXXX

PHP Amount : 900.00  
 Exch Rate : 0.1635  
 HKD Equivalent : 147.15  
 Service Fee : 6.00

TOTAL DUE IN HKD : 153.15

TENDER : 153.20

CHANGE : 0.05

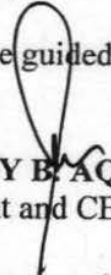
SENDER'S SIGNATURE : *[Signature]*

CONDITIONS UNDER WHICH FUNDS ARE ACCREDITED TO THE COMPANY BY THE COMPANY AS AN AGENT FOR THE PURPOSE OF REMITTING THE FUNDS DESCRIBED IN THIS APPLICATION. THE SAID REMITTANCE ONLY BEING BY THE COMPANY THROUGH THE  
 AUTHORITY OF THE COMPANY AND IN SO FAR AS THE COMPANY IS CONCERNED THE UNDER-SIGNED IS NOT RESPONSIBLE FOR THE ACCREDITING OF FUNDS TO THE COMPANY. THE COMPANY, IN MAKING THE  
 CONTRIBUTION, IS ADVISED THAT ANY AND ALL LIABILITIES FOR LOSS OR DAMAGE ARISING FROM THE FUNDS REMITTED TO THE COMPANY, INCLUDING BUT NOT LIMITED TO THE FOLLOWING: (a) THE ACT, OMISSION, NEGLIGENCE OF THE COMPANY'S  
 CORRESPONDENT, AGENT OR OTHER AGENCY, INCLUDING ANY OF ITS BRANCHES SELECTED FOR THE REMITTANCE; (b) AND DELAY, ERROR, OMISSION, MISFEASANCE OR DEFAULT ON THE PART OF ANY MAIL, INTERCEPT, CABLE OR AIRMAIL  
 SERVICE; (c) THE TITLE OR STATUS OF ANY GOVERNMENT OR GOVERNMENTAL AGENCY OR OTHER GROUP OPERATING GOVERNMENTAL BUSINESS; WHETHER OR NOT OR BY THE COMPANY, IN MAKING THE NECESSARY ARRANGEMENTS. THE UNDER-SIGNED,  
 HOWEVER, AGREES THAT HE SHALL MAKE PRIOR TO THE RECEIPT BY THE COMPANY OF CONTRIBUTION AS DESCRIBED FROM THE UNDER-SIGNED, AGENT OR OTHER AGENT HAVING ANY OF THE FUNCTIONS ENJOINED BY HIM  
 UNDER THIS TRANSACTIONS.

Philippine Health Insurance Corporation  
**RECORDS & LIBRARY MNGT. SECTION**  
*[Signature]*  
**MARIA TERESA A. QUIAOIT**  
 Administrative Officer IV Chief - RELMS  
 Date : 12/7/09  
**CERTIFIED TRUE COPY**

On the other hand, Official Receipt for Overseas Collections by PhilHealth Representative in Hong Kong will serve as Credit Advice. Copy of the official receipts received via e-mail and passbook page of the covered transaction shall be endorsed to Comptrollership Department every quincena period for monitoring and recording purposes.

Please be guided accordingly.

  
**DR. REY B. AQUINO**  
President and CEO

Date signed: 17/10/09

