REPUBLIC OF THE PHILIPPINES Philippine Health Insurance Corporation

Philhearth Regional Office VI, Gaisano City Mall Luna St., Iloilo City Tel Nos. 501-9160 to 62, 501-9165 to 67 region6@philhealth.gov.ph

PURCHASE ORDER

Supplier:	MF MARKETING & RECOPIER	P.O. No:
Address:	YMCA Iznart St. Iloilo City	Date:
		Terms of
Tel./Fax:	335-8986	Mode of

<u>PhilHealth</u>

April 13, 2016 erms of Payment: 30 calendar days ode of Procurement: **NP-Small Value** PR No. 0078-2016

61604-037

Tel./Fax:	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	1	LOT	PRINTING & BINDING	0.65	90,000.00
			Photocopying of official and related documents for CY 2016		
			see attached terms of reference		
				TOTAL	90,000.00

Terms and Conditions:

Supplier Registered with:

- 1. The Agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
- 2. If the date of receipt of this Purchase Order/P.O. by the dealer is not indicated, it shall be deemed received on the day it was acknowledge to have been received by a representative either through fax or e-mail.
- 3. Delivery of the above item(s) shall be made within the prescribed schedule dates. Supplier are advised to inform Procurement Section at least two (2) days before the delivery. All item(s) shall be delivered and accepted by the Procurement Section at 3rd Floor Gaisano City Mall Luna St., La Paz Iloilo City.
- 4. Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- 5. Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery. With provision for a back-up unit in case of repair.
- 6. Payment shall be made in full subject to corresponding government taxes within thirty (30) working days upon receipt of Billing Statement and other relevant documents.
- 7. The contracting parties undertake to comply with Office Order No. 0018-2015 entitled "Reiteration of Philhealth No Gift Policy (Revision 1)" which is deemed incorporated into this Contract. No Philhealth personnel shall solicit, demand, or accept, directly or indirectly, any gift from any person, group, association, or juridical entity, whether from the public or private sector, at anytime, on or off the work premises where such gift is given in the course of official duties or in connection with any transaction which may affect the functions of their office or influence the actions of directors or employees, or create the appearance of a conflict of interest.

Very truly yours,

MSD thief Certified Budget Available: Funds available in the amount of: APPROVED: ENEL A. AMPARO LOURDES F. DIOCSON JUNALYATIL Fiscal Controller II Regional Vice President - PRO VI FISCAL CONTROLLER III Within the C.O.B. Expense Code: Budget: Remarks: CONFORME: MF MARKETING & RECOPIER Signature over Printed Name and Position of Authorized Representative

PhilHealth Regional Office VI General Services Unit RECEIVED

Date: