## REPUBLIC OF THE PHILIPPINES

## **■**nilippine Health Insurance Corporation

709 CityState Center Bldg. Shaw Blvd. Brgy. Oranbo, Pasig City Telefax No. 637-3158 637-4735

## **PURCHASE ORDER**

Supplier:	EPARTNERS SO	LUTIONS, INC.	Purchase Order No.:	03-037-17	
Address:	Unit 2308 Presi	ige Tower, F. Ortigas Jr. Rd. Ortigas Center, Pasig	Date:	March 29, 2017	
Tel.Fax No.:	903-6908, 720-	2956	Term of Payment:	On Account	
Supplier Reg	istered with:	PHILHEALTH	Mode of Procurement:	Shopping	
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Please deliver to this office within

45 working days

from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	16	PCS	FLASH/THUMB DRIVE LOW CAPACITY, 32 GB (Kingston)	775.00	12,400.00
2	95	PCS	FLASH/THUMB DRIVE LOW CAPACITY, 64 GB (Kingston) Note: One (1) year warranty	1,375.00	130,625.00
			LESS: EWT 1% 1,277.01		143,025.00
			GMP 5% 6,385.04		7,662.05
					135,362.95
			PR # Please see attached distribution list		

## Terms & Conditions:

- 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 the 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. Use of elevator shall only be from 09:00 to 11:30 a.m. and 1:30 to 3:00 p.m. during Mon/Wed/Fri (MWF). All item(s) shall be delivered and accepted by the PSMD at 15th Floor, Room 1501 Citystate Ctr. Bldg., Pasig 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. 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 or 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 which 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.
- 7. Warranty Security of 1% of gross amount (Section 62. Warranty of 2016 Revised IRR of RA 9184).

Signature over Printed Name and Position of authorized representative

ELY E. ROXAS Administrative Officer III Certified Budget Available: Php143,025.00 APPROVED: Funds Available in the amount of: Theree M. Tool THERESE M. TINDO LYNES. ARCENAS Fiscal Controller III Fiscal Controller III ALERIE ANNE H. HOLLERO Within the COB: OIC, Corporate Legal Counsel 2016 / EVER Expense Code HEAD OF THE AGENCY 774.to 13 Budget: or Authorized Representative v M -87F Remarks: CONFORME: Received copy of P.O.:

Very truly yours,