



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

POMM-P-007

JOB ORDER

(Non - Inventoriable Items)

OFFICE/DEPARTMENT: PRO 1

Supplier: LEPAGUS ENTERPRISES

Address: Tebag West, Sta. Barbara, Pangasinan

Tel. Fax No.: 653-1281 / 09209571268

Supplier Registered with: 906-966-399-000 V

Work Order No.: 2017-57

Date: 11/16/2017

Term of Payment/ Charge

Mode of Procurement: Negotiated Procurement-
Small Value Procurement

Please deliver to this office within 1 day upon approval of final sample.

Note: Additional working days to submit for approval of text / sample.

| NO. | QTY | UNIT | SERVICE DETAILS | UNIT PRICE | TOTAL AMOUNT |
|-----|-----|------|--|--------------------|--------------|
| | 1 | lot | Hauling of various supplies in PS La Union xxxxxxxxxxxxxxxxxxxx nothing follows xxxxxxxxxxxxxxxxxxxxxxx Less: Tax VAT (5%/1.12) EWT (2%/1.12) PR No. 17-1103-0518 Requesting Unit: GSU | 16,000.00 | 16,000.00 |
| | | | | Total - Net of Tax | 1,000.00 |
| | | | | | 15,000.00 |

Terms & Conditions:

- 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.
- If the date of receipt of the Job Order (J.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledged to have been received by a representative either through fax or e-mail.
- Delivery of the above item/s shall be made within the prescribed schedule dates. Suppliers are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall be from 9:00AM to 11:30 AM and 1:30pm to 3:00PM during Mon/Wed/Fri (MWF).
All item/s shall be delivered and accepted by the Procurement Section at 15th Floor, Room 1503 Citystate Ctr. Bldg. Pasig City.
- Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery.
- In case the series of layout/design presented by the supplier does not satisfy the end-user, the Corporation has the right to cancel the Job Order (JO).
- Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.

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| PHILHEALTH REGIONAL OFFICE I COA 12/11/17 Received By: <u>AY</u> Time: <u>10:00</u> | | Very truly yours, <u>MARICAR M. ARZADON, M.D.</u> MO VII / MSD Chief |
| Certified Budget Available: <u>JOSE A. MONES</u> Fiscal Controller III | Funds Available in the amount of: <u>16,000.00</u> <u>EDWARD Q. ESPIRITU</u> OIC-FMS | APPROVED <u>ATTY. RODOLFO B. DEL ROSARIO, JR., MBA, CSEE</u> OIC-ORVP, PRO1 |
| With in the COB: <u>2017-57</u> Expense Code: <u>110-0000</u> Bdget: <u>110-0000</u> Remarks: | BY THE AUTHORITY OF THE OIC-FMS <u>MARIMEL C. BRAVO</u> FISCAL CONTROLLER II | |
| Received copy of J.O. on <u>DECEMBER 06, 2017</u> Date | | CONFORME: <u>LEVY P. AGUSTIN</u> Signature over Printed Name of Supplier / Representative |

COA on Travel

12/6-8/17