

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

POM-01P-001

JOB ORDER

(Non-Inventoriable Items)

OFFICE/DEPARTMENT: PRO-1

Supplier: NAM-AY CONSTRUCTION & GENERAL MERCHANDISE
Address: Pob. Este, Sta. Cruz, Ilocos Sur
Tel. Fax No.: 0917-534-5104
Supplier Registered with: 403-230-398-000 V

Work Order No.: 2017-90

Date: 12/29/2017

Term of Payment: Charge

Mode of Procurement: Negotiated Procurement
Small Value Procurement

Please deliver to this office within on February 15, 2018 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	Repair and installation of Frontline Counter (4.5 M Length x 0.75 M Height) XXXXXXXXXXXXXXXXXXXX nothing follows XXXXXXXXXXXXXXXXXXXX Less: TAX VAT (5%/1.12) EWT (2%/1.12) PR No. 17-1213-0617 Requesting Unit: PSO Candon	774.55 309.82 Total - Net of Tax	17,350.00 16,269.68

Terms & Conditions

- The agency shall impose penalty in an amount equivalent to 1% 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 goods/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 11:30AM and 1:30pm to 3:00PM during Mon/Wed/Fri (MWF). An agency 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 orders within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.

PHILHEALTH REGIONAL OFFICE
COA
1-12-12
Received By:
Time:

By the authority of the MSD Chief

Very truly yours,

MARICAR M. ARZADON, M.D.
MO VII / MSD Chief

JANE C. RAGOS
PC IV / ASS. CHIEF

EDWARD O. ESPIRITU
MO IV / ISS. CHIEF

Approved Budget Available:

Funds Available in the amount of 11,200.00

JOSE A. MONES
Chief Controller

With a check of
equipment sold
Deliver
Receipt

9103 10
RM - 8/F

APPROVED:
ATTY. RODOLFO B. DEL ROSARIO, JR., M.D.
OIC, Office of the Regional Vice President
By the authority of the Division Chief
JOSEPHINE O. QUINTON, M.D.
DIVISION CHIEF
CONFORME:
Emadeliza Roque
Signature over Printed Name
of Supplier / Representative

Received copy of J.O. on

12.29.17
Date

INSTRUCTIONS ON HOW TO USE THIS FORM:

- This form shall be used for the acquisition of services such as printing, renovation, etc.
- This form shall be accomplished by the staff of the Procurement Section upon decision of the Division Chief & Senior Manager as to which supplier has submitted the lowest quotation and if it had met the required specs.
- All other terms and conditions stated herein are valid upon completion of signatories of authorized personnel.
- The Receipt allocated must be affixed on the PO by routing to the Comptrollership Department upon approval of the PO.
- It serves the purpose of a contract which shall be the basis of any delivery requirement and payment processing.
- This form shall be prepared in 3 copies distributed as follows:
1 copy - Comptrollership Dept.
1 copy - COA