



Republic of the Philippines  
PHILIPPINE HEALTH INSURANCE CORPORATION  
LNU, Commercial Bldg., Francisco Duque St., Taguac District Dagupan City

neu  
12/11/17

POMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: **LIM PAN COMMERCIAL**  
Address: **AB Fernandez Ave., Dagupan City**  
Tel.Fax No.: **522-2056 / 523-0478**  
Supplier Registered with: **102-278-100-000 V**

PO No. **17-200**  
Date: **11/23/2017**  
Terms of Payment: **Charge**  
Mode of Procurement: **Shopping**

Please deliver to this office within **30 days** from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	5	pc	Clipboard for Legal Size document	58.00	290.00
2	30	bx	Fastener Metal and Plastic combination, 2 pc-clip, 70mm, 50 sets/box	26.00	780.00
3	3	pc	Ruler, 12" Metal	40.00	120.00
4	1	pc	Whiteboard with frame, 18" x 24"	270.00	270.00
XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX				<b>TOTAL</b>	<b>1,460.00</b>
Less: VAT (5%/1.12)					<b>65.18</b>
PR No. 17-0816-0385					
PURPOSE: Procurement of supplies from the amended APP batch 4				<b>TOTAL</b>	<b>1,394.82</b>

Terms & Conditions:

- In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent (1%) for every day of delay shall be imposed.
- For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
- The contracting parties undertake to comply with Office Order No. 0018-2015 entitled "Reiteration of PhilHealth No Gift Policy (Revision 1) which is deemed incorporate into this Contract. No PhilHealth personnel shall solicit, demand, or accept, directly or indirectly, any gift from any person, group, association, or judicial 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 thier office or influence the actions of directors or employees, or create the appearance of a conflict of interest.
- PhilHealth shall have the right to reject and return the items and cancel the corresponding PO if goods delivered are defective, incomplete or non-compliant as specification when quoted.
- In case of returned/rejected items which cannot be replaced within seven (7) calendar days from notice, PhilHealth shall demand full refund of payment made "in cash" or "in check" three (3) calendar days.
- Deliveries should be made within 8:00AM to 3:00PM on working days on or before the date stipulated in the PO.

By the authority of the MSD Chief

Very truly yours,

JANE C. RAGOS  
FC IV / ASS CHIEF

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

Certified Budget Available: Funds Available in the amount of: **1,460.00**

JOSE A. MONES  
Fiscal Controller III

EDWARD Q. ESPIRITU  
OIC-FMS Head

PHILHEALTH REGIONAL OFFICE I  
COA

DEC 15 2017

Received By: **ay**  
Time:

APPROVED:

ATTY. RODOLFO B. DEL ROSARIO, JR., MBA, CSEE  
OIC-OFFICE OF THE REGIONAL VICE PRESIDENT

BY THE AUTHORITY OF **OIC RVP**

With in the COB:

Expense Code:

Bdget:

Remarks:

Conforme:

**GIRLIE GAPUZ**

Date: **12/14**

Signature over Printed Name and Position of Authorized Representative

Maricar M. Arzadon, M.D.  
Medical Officer VII

Date