

Supplier **PIONEER HOME INDUSTRIES CORP.** Job Order No.: **18-05-044**
 Address **13 De Jesus St., SFD, Quezon City** Date: **May 3, 2018**
 Tel.Fax No. **373-1624** Terms of Payment: **On Account**
 Supplier Registered with: **PHILHEALTH** Mode of Procurement: **Small Value Procurement**

Please deliver to this office within **20 working days upon receipt of approved sample** upon approval of the following

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
1	2,000	PCS	PROCUREMENT OF TOTE BAGS	80.00	160,000.00
			Specifications: Size: Height - 11" x Width - 13" x Gusset - 5" Customization: Front - Full Color, Back - 1 color print Packaging: Individual Poly Bag		160,000.00
9			LESS: EWT 2% 2,857.14 ✓ GMP 5% 7,142.86 ✓		10,000.00 ✓
			PR # 18-0126 dtd. 04/13/18 SHIA		150,000.00

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 acknowledge 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. 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.
- 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. With provision for a back-up unit in case of repair.
- 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.
- Retention Fee of 1% of gross amount (GPPB Resoution No. 30-2017 of 2016 Revised IRR of RA 9184).

Very truly yours,

ELY E. ROXAS

Administrative Officer III

Certified Budget Available:	Funds Available in the amount of:	Php160,000.00	APPROVED:
for: <i>Marina M. Oros</i> CORAZON M. TABULAO Fiscal Controller III		<i>LYNIE S. ARCEAS</i> LYNIE S. ARCEAS Fiscal Controller III	DR. ISRAEL FRANCIS A. PARGAS HEA/DIE-VP HEAD OF THE AGENCY or Authorized Representative
Within the COB: <i>100-10/SHIA Trust fund</i> Expense Code: <i>2040101612 (5524901002)</i> Budget: <i>116,000.00</i> Remarks: <i>18-05-044</i>		<i>ABE-H 2018-03-087</i> <i>116,000.00</i>	
CONFORME: <i>EDWIN L. MUNOZ</i> <i>5/8/18</i> Print Name and Signature of Supplier/Representative			