

FF M : JAY BANANGA

FAX NO. :

04 Sep. 2018 09:05 P 002

REPUBLIC OF THE PHILIPPINES
Philippine Health Insurance Corporation
 709 CityState Center Bldg.
 Shaw Blvd. Brgy. Oranbo, Pasig City
 Telefax No. 637-3158 637-4735

PURCHASE ORDERPurchase Order No.: **08-080-18**Supplier: **BOC'S TRADING CO., INC.**Date: **August 24, 2018**Address: **264 66 San Vicente St., Mezzanine, Binondo, Manila**Term of Payment: **Cash Account**Tel/Fax No.: **241 2981**Mode of Procurement: **Shopping**Supplier Registered with: **PHILHEALTH**Please deliver to this office within **15 working days** from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	6	tube	LEAD, for Mechanical Pencil, 0.5mm (12 pcs/tube)	15.00	90.00
2	14	pc	CUTTER, heavy duty, retractable L-500	15.00	210.00
3	18	pc	CUTTER, small, retractable L-200	7.50	135.00
4	3	pc	PUNCHER, heavy duty w/ two hole guide, approx. 6.5 diameter hole	125.00	375.00
5	38	pair	SCISSORS, size 8, stainless steel with plastic handle	45.00	1,710.00
6	36	pair	SCISSORS, size 15cm (6), stainless steel	13.00	468.00
7	8	pc	STAPLE WIRE REMOVER, plier type metal or combination of plastic and metal	52.00	416.00
8	3	pc	STAPLER, standard, heavy duty	150.00	450.00
9	66	pc	STAPLER, with remover HD, No. 35	160.00	10,560.00
10	53	pc	CARTOLINA, white, 572mm x 724mm (22-1/2 x 28-1/2) min. 100gsm	4.00	212.00
11	82	pc	COVERBOARD, morocco, assorted, A4	2.40	196.80
12	100	pc	COVERBOARD, morocco, assorted, Legal	2.40	240.00
13	230	pc	MANILA PAPER, 60gsm, thickness: 0.014mm, min. dimension: 120mm x 900mm, min. (10 sheets per sleeves)	2.40	552.00
14	276	pack	PAPER, special, color specified, (10's) short	20.00	5,520.00
15	58	pack	STICKER PAPER, A4 (10 pcs/pack)	30.00	1,740.00
					23,032.80
LESS: EWT 1% 205.65					
PR # GMP 5% 1,028.25					1,233.90
18-0276 dtd. 06-07-18 PRID					21,798.90
18-0361 dtd. 07-19-18 PRID					

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 Purchase Order (P.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledged 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 18th Floor, Room 1801 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.
- Warranty Security of 1% of gross amount (Section 62, Warranty of 2016 Revised IRR of RA 9184).

Very truly yours,

ELY E. ROXAS

Administrative Office - III

Approved Budget Available: _____ Funds Available is the amount of: Php23,032.80 Therese M. Tindoy THERESE M. TINDOY Fiscal Controller III	LYNE S. ARCEBAS LYNE S. ARCEBAS Fiscal Controller III 23,032.80	APPROVED: MARY ANN A. MALINIS Head, SBAC HEAD OF THE AGENCY or Authorized Representative
With the COB: 2018 Expense Code: 507030001 716 Budget: P 23,032.80 Remarks: _____	CONFORME: ALICIA S. LUNA Signature over Printed Name and Position of authorized representative Received copy of P.O.: 09-07-18 Date	