

## Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

## JOB ORDER

(Non - Inventoriable Items)

OFFICE/DEPARTMENT: PRO 1

COA 7- 6-18 OMM-P- 007 Received By: Time:

PHILHEALTH REGIONAL OFFICE !

Supplier	<b>INDUSTRIAL</b>	R.	TRANSPORT	FΩ	LIPMENT	INC
Supplier:	INDUSTRIAL	O.	INMINISTONI		CITIVILIA	

Address: Rizal St., Brgy. II (Nueva), Dagupan City

Tel. Fax No.:

523-3265

Supplier Registered with:

000-201-284-00001 V

Work Order No.: 2018-36

Date: 6/28/2018

Term of Payment: Charge

Mode of Procurement: Direct Contracting

Please deliver to this office within <u>1 week</u> 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
			Periodic Maintenance for Isuzu Crosswind XUV AT, CS 3661		
			(perform 30,000 KM check-up)		
	1	gal	IGMO Engine Oil	1,212.25	1,212.2
	1	рс	Oil Filter	1,408.70	1,408.7
	1	рс	Fuel Filter	529.38	529.3
	2	ltr	IGMO Engine Oil	324.74	649.4
	1	рс	Brake Cleaner	227.71	227.7
	1	рс	Diesel System Cond	418.98	418.9
		•	Shop Materials	38.64	38.6
			LABOR		2,596.6
			xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	TOTAL	7.081.7
			Less: TAX	Γ	
			VAT (5%/1.12)		316.1
			PR No. 18-0103-0022	Total - Net	6,765.59
			Requesting Unit: GSU-Motorpool	of Tax	0,705.59

Terms & Conditions:

- 1 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.
- 2. 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.
- 3. 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.
- 4. Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- 5. Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery.
- 6. 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
- 7. Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptence and Inspection Report.

By the authority of the MSD Chief Z\_\_\_\_\_\_\_/ G (28/10)

	LETECIA L. RAVANCHO	CYNTHIA S. SANTOS
	FC IV / ASS CHIEF	Division Chief IV / MSD Chief
Certified Budget Available:	Funds Available in the amount of 7,081. 7	APPROVED:
108E A. MONES	EDWARD Q. ESPIRITU	ALBERTO C. MANDURIAO
Fiscal Controller	AO IV / FMS Chief	Regional Vice President, PRO1
1/1/2		by the authority of the MIP.
With in the COB:	C. C. C.	m/ 1.hal
Expense Code:	21.7.7	
Bdget: /h 1	<u> </u>	Marica M. Arzadon, M.D.
Remarks: H.M. I	///	Medical Officer VII
Recevied copy of J.O. on	0 5 JUL 2018	CONFORME: Southbyin
The second secon	Date	Signature over Printed Name
		of Supplier / Representative

## INSTRUCTIONS ON HOW TO USE THIS FORM:

- 1. This form shall be used for the acquisition of services such as printing, renovation, etc.
- 2. 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.
- 3. All other terms and conditions stated herein are valid upon completion of signatories of authorized personnel.
- 4. The budget allocated must be affixed on the PO by routing to the Comptrollership Department upon approval of the PO.
- 5. This serves the purpose of a contract which shall be the basis of any delivery requirement and payment processing.
- 6. This form shall be prepared in 3 coipies distributed as follows:

1 copy - Comptrollership Dept.

1 copy - COA