



Republic of the Philippines  
PHILIPPINE HEALTH INSURANCE CORPORATION

PHILHEALTH REGIONAL OFFICE I  
COA  
OCT 29 2018  
Received By: FB  
Time: \_\_\_\_\_

POMM-P-007

**JOB ORDER**  
(Non - Inventoriable Items)  
OFFICE/DEPARTMENT: PRO 1

Supplier: **BABY RUTH F. TORRE**  
Address: **San Carlos City, Pangasinan**  
Tel. Fax No.: **9238702380**  
Supplier Registered with: **945-868-727 NV**

Work Order No.: **2018-56**  
Date: **10/23/2018**  
Term of Payment: **COD**  
Mode of Procurement: \_\_\_\_\_

Please deliver to this office within **on October 26, 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	HONORARIA for the conduct of 2018 Legal Forum / Anti-Fraud Awareness Topic: Administrative Liabilities of Government Official and Employees XXXXXXXXXXXXXXXXXXXX nothing follows XXXXXXXXXXXXXXXXXXXX Less: TAX VAT (3%) PR No. 18-1015-0391 Requesting Unit: Legal Unit		5,000.00
					150.00
				Total - Net of Tax	4,850.00

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 acknowledged 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. 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.
- 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 taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.

BY THE AUTHORITY OF THE

**MARIMEL C. BRAVO**  
FISCAL CONTROLLER III

Very truly yours,

**CYNTHIA S. SANTOS**

Division Chief IV / MSD Chief

Certified Budget Available:	Funds Available in the amount of: <u>5,000.00</u>	APPROVED:
<b>JOSE A. MONES</b> Fiscal Controller III	BY THE AUTHORITY OF THE CHIEF, FMS <b>JANE C. RAGOS</b> FC IV / FMS Chief	<b>JOSE A. MONES</b> FISCAL CONTROLLER III
Within the COB:		<b>ALBERTO C. MANDURIAO</b> Regional Vice President, PRO1
Expense Code:		
Budget:		
Remarks:		

Received copy of J.O. on

10-24-2018

Date

CONFORME

Signature over Printed Name  
of Supplier / Representative