8/10 1:59 pm

8/15 1:05 pm

*Republic of the Philippines*
PHILIPPINE HEALTH INSURANCE CORPORATION
LNU Commercial Bldg., Fernando Evaze St., Tapuac District Dagupan City

PHILHEALTH REGIONAL OFFICE I
COA
8-20-18
Received By: [illegible]
Time:

POMM-P- 006

# PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT

Supplier: ZASHEN FASHION
Address: 1961 Espana Boulevard, Sampaloc, Manila
Tel./Fax No.: 02) 741-6864 / 0917-304-5108
Supplier Registered with: 121-524-683-000 V

PO No. 18-128
Date: 8/13/2018
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement-Small Value Procurement

Please deliver to this office within *15 working days* from receipt hereof the following:

| NO. | QTY | UNIT | ITEM DESCRIPTION | UNIT PRICE | TOTAL AMOUNT |
|---|---|---|---|---|---|
| 1 | 24 | pcs | MARKETING SHIRT (P-AIMS) | 300.00 | 7,200.00 |
| | | | xxxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxx | | |
| | | | Less: VAT (5%/1.12) | | 321.43 |
| | | | PR No. 18-0622-0247 | | |
| | | | PURPOSE: For Marketing and Promotions for Collection Section use | TOTAL | 6,878.57 |

Terms & Conditions:

1. 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.**
2. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
3. The contracting parties undertake to comply with Office Order No. 0018-2015 entitled "**Reiteration of PhilHealth No Gift Policy (Revision 1)** which is deemed [illegible] 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 any time, 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 their office or influence the actions of directors or employees, or create the appearance of a conflict of interest.
4. 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.
5. 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.**
6. Deliveries should be made within **8:00AM to 3:00PM** on working days on or before the date stipulated in the PO.

[illegible] AUTHORITY OF THE
8/15
[illegible] C. BRAVO
FISCAL CONTROLLER II

Very truly yours,

8/13/18
CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of 7,200

JOSE A. MONES
Fiscal Controller III

JANE C. RAGOS
FC IV / FMS Chief

With in the CCB
Expense Code
Budget
Remarks

Conforme:

8/14/18
Date

Signature over Printed Name and Position of Authorized Representative

APPROVED:

ALBERTO C. MANDURIAO
Regional Vice President, PRO1

Date