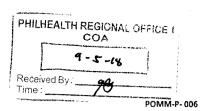


Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

LNU, Commercial Bldg., Francisco Duque St., Tapuac District Dagupan City



PURCHASE ORDER

OFFICE/DEPARTMENT:	ADMINISTRATIVE SECTION.	GENERAL SERVICE UNIT

	OTTICL DEFINITION OF THE SECTION OF SECTION OF THE			
Supplier:	MOSTACO MARKETING	PO No. 18-142		
Address:	BF Resort Village, Las Pinas City, Metro Manila	Date: 8/30/2018		
Tel.Fax No.:	02-869-4770	Terms of Payment: COD		
Supplier Reg	istered with: 915-524-116 V	Mode of Procurement: Shopping		

Please deliver to this office within ready for pick-up within 7-15 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	550	roll	EPSON TM-788V THERMAL 3-1/8 INCH X 230' PAPER	50.00	27,500.00
			xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	TOTAL	27,500.00
		***************************************	Less: VAT (5%/1.12)	1,227.68	
	Production of the Control of the Con		EWT (1%/1.12)	245.54	1,473.22
	- Commission of the Commission		PR No. 18-0726-0284		
			PURPOSE: For PRO 1 use for the 3rd & 4th quarter of CY 2018	TOTAL	26,026.78

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 incorporate 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 anytime, 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 thier 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.

Very truly yours,

6 Deliveries should be made within 8:00AM to 3:00PM on working days on or before the date stipulated in the PO.

APPROVED: Funds Available in the amount of: _ Certified Budget Available: IOSÉ A. MONES JANE C. RAGOS Fiscal Controller III With in the COB: ALBERTO C. MANDURIAO Expense Code: Regional Vice President, PRO1 Bdget: Remarks: Conforme: ampanez September 4, 2018 and Marketing Date Signature over Printed Name and Position of Authorized Representative