Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
LNU, Commercial Bldg., Francisco Duque St., Tapuac District Dagupan City

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

POMM-P- 006

# PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT

Supplier: MARIGOLD STORE
Address: AB Fernandez Ave., Dagupan City
Tax No.: 522-2328 / 522-0080
Supplier Registered with: 157-686-860-002 V

PO No. 18-178
Date: 10/18/2018
Terms of Payment: Charge
Mode of Procurement: Shopping

Please deliver to this office within 2-3 *weeks* from receipt hereof the following:

| NO. | QTY | UNIT | ITEM DESCRIPTION | UNIT PRICE | TOTAL AMOUNT |
|---|---|---|---|---|---|
| | 46 | pck | TIME CARD for Amano/Iwata bundy clock 85mm x 190mm (3-3/8" x 7-1/2") imported 14 pts. Tagboard, offset process, two sides printing 100 pieces/pack | 89.00 | 4,094.00 |
| | | | xxxxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxxx | TOTAL | 4,094.00 |
| | | | Less: VAT (5%/1.12) | | 182.77 |
| | | | PR No. 18-0226-0137 | | |
| | | | PURPOSE: For PRO I use from the amended APP batch 2 rev. 1 | TOTAL | 3,911.23 |

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.
6. Deliveries should be made within 8:00AM - 12:00NN and 1:00PM - 3:00PM on working days on or before the date stipulated in the PO.
7. Partial delivery per item will not be accepted.

BY THE AUTHORITY OF THE
MARIMEL C. BRAVO
LOCAL CONTROLLER III

By the authority of the MSD Chief
EDWARD Q. ESPIRITU
AO IV / ASS CHIEF

Very truly yours,
CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: 1,109.00

JOSE A. MONES
Local Controller III

JANE C. RAGOS
FC IV / FMS Chief

Received in the BOB:
Purpose Codes:

Conforme:
MARLO D. NOVALES
Signature over Printed Name and Position of Authorized Representative
Date: 09.29.18

APPROVED:
ALBERTO C. MANDURIAO
Regional Vice President, PRO1
BY THE AUTHORITY OF THE RVP, PRO 1
SECTION HEAD - BAS
Date