Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

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

PURCHASE ORDER

POMM-P- 006

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT

Supplier:	MARIGOLD STORE	PO No.	18-196
Address:	AB Fernandez Ave., Dagupan City	Date:	11/14/2018
Tel.Fax No.:	522-2328 / 522-0080	Terms of Payment:	Charge
Supplier Reg	istered with: 157-686-860-002 V	Mode of Procurement:	Shopping

Please deliver to this office within <u>3-4 weeks</u> from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	11	рс	BINDER Three (3) hole, Black A4, size D-TYPE 1, can hold 3 inches of thick paper	165.00	1,815.00
	1	рс	CORK BOARD Wall-type, w/out frame, 36 x 48 (1/2)	1,285.00	1,285.00
	29	рс	ENVELOPE Expanding, plastic, with rubber strap, Size: 380mm x 260mm for legal size documents, assorted colors	54.50	1,580.50
	3	рс	ERASER Felt, for blackboard / whiteboard, Thickness: 19mm., Size: 122mm x 42mm	12.00	36.00
	127	рс	MARKER Permanent Pen, Black, broad tip, non-toxic	29.50	3,746.50
	14	рс	MARKER Permanent Pen, Blue, broad tip, non-toxic	29.50	413.00
17 pc MARKER Perma		рс	MARKER Permanent, Blue, felt, bullet tip, non-toxic, medium point	29.50	501.50
	7	bx	PAPER CLIP Backfold, 32mm, all metal, clamping length: 32mm(- 1mm), clamping depth: 14mm(min.), thickness of metal: 0.30mm(min.), 12 pcs. per\box	33.60	235.20
			xxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxx	TOTAL	9,612.70
			Less: VAT (5%/1.12)		429.14
			PR No. 18-0717-0278		
			-PURPOSE: For PRO 1 use from the amended APP batch 5	TOTAL	9,183.56

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	1:00PW	3:00PM on working days on or before the date stipulated in the PO
	Partial delivery per item will not be accepted.		

Partial delivery per item will not be accepted.	Very truly yours, CYNTHIS. SANTOS Division Chief IV / MSD Chief
Certified Budget Available: Funds Available in the amount of: JOSE A. MONES JANE C. RAGOS Fiscal Controller III FC IV / FMS Chief With in the COB: MARIMEL C. BRAVO Expense Code: MARIMEL C. BRAVO Bdget: MARIMEL C. ONTROLLER II	APPROVED:
Conforme: <u>MiA(R)(A), NiC)(A)</u> Signature over Printed Name and Position of Authorized Representative	Date