

Rush
please



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

POMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: **MCCAROL FOODS INC. (McDonald's)**

PO No. **18-1**

Address: **Tapuac District, Dagupan City**

Date: **2/22/2018**

Tel.Fax No.: **540-9335**

Terms of Payment: **COD**

Supplier Registered with: **009-228-108-000 V**

Mode of Procurement: **Negotiated Procurement-
Small Value Procurement**

Please deliver to this office within **February 22-23, 2018** from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	154	pcs	1 pc. Chicken with spaghetti & drinks	115.00	17,710.00
	154	pcs	Banana Pie	29.00	4,466.00
	154	pcs	Cheeseburger ALC	55.00	8,470.00
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL	30,646.00
			Less: VAT (5%/1.12)	1,368.13	
			EWT (1%/1.12)	273.63	1,641.76
			PR No. 18-0220-0122		
			PURPOSE: Conduct of Risk Management Re-orientation and Overview of Risk Information Management System to PRO 1 employees	TOTAL	29,004.24

Terms & Conditions:

- 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.**
- For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
- 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.
- 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.
- 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**.
- Deliveries should be made within **8:00AM to 3:00PM** on working days on or before the date stipulated in the PO.

BY THE AUTHORITY OF THE

MARIMEL C. BRAVO
FISCAL CONTROLLER III

By the authority of the MSD Chief

Very truly yours,

JANE C. RAGOS
PCW / AS CHIEF

MARICAR M. ARZADON, M.D.
MO VII / MSD CHIEF

Certified Budget Available:	Funds Available in the amount of: <u>30,646.00</u>	APPROVED:
JOSE A. MONES Fiscal Controller III	EDWARD Q. ESPIRITU AO IV / FMS CHIEF	ATTY. RODOLFO B. DEL ROSARIO, JR., MBA, CSEE REGIONAL VICE PRESIDENT
With in the COB: <u>2/28</u>	By the authority of FMS, Chief: Jose A. Mones 2.27.18 Fiscal Controller III	
Expense Code: <u>00000001</u>	COA received Date: 2-28-18 By: As	
Bdget: <u>184</u>		
Remarks:		
Conforme: <u>[Signature]</u>		
<u>MARY ANTONETTE A. ESPADA</u> Signature over Printed Name and Position of Authorized Representative	Date: <u>FEB 22, 2018</u>	Date