



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

2.2/  
2018  
12/3

PHILHEALTH REGIONAL OFFICE I  
COA  
DEC 10 2018  
Received By: JS  
Time: 1:16

POMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: HOTELINDA SUITES  
Address: Rivero St., Brgy. VIII, Vigan City, Ilocos Sur  
Tel.Fax No.: 077-722-2402  
Supplier Registered with: 102-277-382-000 V

PO No. 18-220  
Date: 12/3/2018  
Terms of Payment: Charge  
Mode of Procurement: Negotiated Procurement-  
Small Value Procurement

Please deliver to this office within on December 13, 2018 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	50	pax	Snacks	125.00	6,250.00
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL	6,250.00
			Less: VAT (5%/1.12)		279.02
			PR No. 18-1119-0413		
			PURPOSE: For the conduct of PhilHealth "Pasko Mo. Alaga Ko" Program for Sponsored Members	TOTAL - NET	5,970.98

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

Very truly yours,

CYNTHIA S. SANTOS  
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: C. 250.00

JOSE A. MONES  
Fiscal Controller III

JANE C. FAGOS  
FC IV / FMS Chief

With in the CQB: 2018  
Expense Code: 609999002  
Bdget: 6,250.00  
Remarks: ALAGA KA

Conforme:

MINDA P. MANDURIAO

Date: 12/6/18

Signature over Printed Name and Position of Authorized Representative

APPROVED:

ALBERTO C. MANDURIAO  
Regional Vice President, PRO1

Date

03 DEC 2018