PHILHEALTH REGIONAL OFFICE I
COA
JAN 03 2019
Received By:
Time:

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

POMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: SK HARDWARE & GENERAL MERCHANDISE
Address: #88 SK Bldg., Rizal St., Dagupan City
Tel.Fax No.: 522-2559/ 1682-3/ 5388
Supplier Registered with: 131-149-412-000 V

PO No. 18-252
Date: 12/20/2018
Terms of Payment: Charge
Mode of Procurement: Shopping

Please deliver to this office within *30 days* from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	7	set	HARDWARE SUPPLY Door Knob, Heavt Duty	400.00	2,800.00
	1	pc	HARDWARE TOOLS Screw Driver, Philips	85.00	85.00
			xxxxxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxxx	TOTAL	2,885.00
			Less: VAT (5%/1.12)		128.79
			PR No. 18-0222-0126		
			PURPOSE: For PRO 1 use	TOTAL - NET	2,756.21

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 juridical 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 their 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 to 3:00PM on working days on or before the date stipulated in the PO.

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of 2,885.00

JOSE A. MONES
Fiscal Controller III

JANE C. RAGOS
FC IV / FMS Chief

Within the COB: 2018
Expense Class: [illegible]
Budget: 2,885.00
Remarks:

Conforme:

THERESA REVILLA Date: 12/28/18

Signature over Printed Name and Position of Authorized Representative

APPROVED:

ALBERTO C. MANDURIAO
Regional Vice President, PRO1
BY THE AUTHORITY OF THE RVP, PRO 1

MARLENE D. SOLIBA, M D
MEDICAL SPECIALIST IV
12/27/18