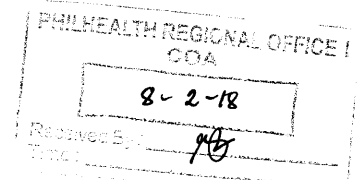




Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
 (NU, Commercial Bldg., Francisco Duque St., Lapu-Lapu District, Davao City)



POMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: **ABACUS BOOK & CARD CORPORATION, INC.**PO No. **18-99**Address: **Ground Floor, Robinsons Place Calasiao, Pangasinan**Date: **7/14/2018**Tel./Fax No.: **632-0069**Terms of Payment: **Charge**Supplier Registered with: **299-299-000 V**Mode of Procurement: **Shopping**Please deliver to this office within **1 month** from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	54	roll	Adhesive Tape size 1", double sided with foam, 1.52 meters, strong adhesive	269.75	14,566.50
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX		
			Less: VAT (5%/1.12)	650.29	
			EWT (1%/1.12)	130.06	780.35
			PR No. 18-0622-0249		
			PURPOSE: For PRO Use from the approved APP Batch 3		
			TOTAL		13,786.15

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 incorporated 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 their 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.

Very truly yours,

CYNTHIA S. SANTOS
 Division Chief IV / MSD Chief

Certified Budget Available: _____ Funds Available in the amount of: <u>13,786.15</u>		APPROVED: 11 7 JUL 2018 ALBERTO C. MANDIBAGO Regional Vice President, PRO1
JOSE A. MONES Fiscal Controller III	EDWARD O. ESPIRITU AO IV / FMS CHIEF	
With in the COB: <u>8/2/18</u> Expense Code: <u>18-0622-0249</u> Budget: <u>13,786.15</u> Remarks: _____		
Conformed: <u>8/2/18</u> ROSEMARIE A. DURAN Signature over Printed Name and Position of Authorized Representative		Date: _____

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