

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
 2nd and 3rd floor, BG investment Corporation Bldg. Gov. Lim Ave.
 Zamboanga City
 Telephone No. (062) 992-3569
 Fax No. (062) 992-2739
Purchase Order

Supplier: Zambo. Medika Integrated Industries, Inc.
 Address: Mayor Jaldon Street, Canelar, Zamboanga city
 Tel/Fax No.: 991-2214
 Supplier Registered with: VAT
 TIN: 003-580-402
 Please deliver to this office within 15 working days from receipt hereof the following:

P.O. No.: 18-10-012
 Date: October 10, 2018

Mode of Procurement: Negotiated Procurement
Small Value Procurement

NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
2	1	unit	Nebulizer, Pulmo nebulizer kit with tee, tubing, mouthpiece, corrugated tubing and reservoir 6mL with MQ5600 air machine ***** Nothing Follows ***** Less: 5% WHT 102.68 Less: 1% EWT 20.54	2,300.00	2,300.00 2,300.00 123.22 2,176.78



Note: Cut-off delivery time: 3:00 PM

Conditions:

1. The agency shall impose penalty in an amount equivalent to 1/10 of 1 percent of the total value of undelivered order for each day of the delay as liquidated damages.
2. Render your bills in triplicate copies including the original.
3. If the date of receipt of the P.O. by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of the approval of the P.O.
4. For imported items, IMPORTANT DOCUMENTS specially showing the condition, serial numbers of the equipment purchased, and tax receipts, should be submitted by the supplier.
5. In case of return, all expenses shall be shouldered by the supplier to and from.
6. No cancellation is allowed upon serving of P.O.

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.

Funds Available in the amount of: _____

PHP 2,300.00

Very truly yours,

Maria Joy A. Fabella
MARIA JOY A. FABELLA
 Division Chief IV, MSD

Rosemin E. Damsid
ROSEMIN E. DAMSID
 Fiscal Controller IV

Prepared by:

Erwin R. Suficiencia
ERWIN R. SUFICIENCIA
 Administrative Officer I

APPROVED: _____

Romeo D. Alberto
ROMEO D. ALBERTO
 Regional Vice President
 (Or Authorized Representative)

CONFIRMED: _____

Catherine B. Ted
 Print Name and Signature of
 Supplier/Representative

Received copy of P.O. on 10/16/18
 By: _____