

REPUBLIC OF THE PHILIPPINES  
**Philippine Health Insurance Corporation**  
 709 CityState Center Bldg.  
 Shaw Blvd. Brgy. Oranbo, Pasig City  
 TeleFax: 637-3158 637-4735

SBAC-PS-14

**J O B O R D E R**  
 (Non-Inventoriable Items)

Supplier **CRISTANELLE INTERNATIONAL INC.** Job Order No.: **19-11-118**  
 Address **UGFC-4A, Classica 1 Condo. 112 H. V. Dela Costa St., Salcedo Vill. Makati** Date: **November 14, 2019**  
 Tel.Fax No. **893-4188** Terms of Payment: **On Account**  
 Supplier Registered with: **PHILHEALTH** Mode of Procurement: **Small Value Procurement**

**(30) calendar days and an  
 additional 7 calendar days for  
 presentation and approval of**

Please deliver to this office within \_\_\_\_\_ upon approval of the following

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
1	450	pcs	<p style="text-align: center;"><b>PROCUREMENT OF COSTUMIZED RECYCLED NOTEBOOK WITH CALCULATOR, STICKY NOTES AND PEN AS GIVEAWAYS FOR THE PHILHEALTH NATIONAL QUIZ BEE REGIONAL PARTICIPANTS</b></p> <p>Specs:                      Inclusions: with Calculator, stricky notes and pen                      Material: Recycled/Eco Material                      Dimension: 18 x 12 cm                      Logo Print: Glossy Print (UV LED Direct Print)                      Packaging: Individual Box                      Warranty: 30 calendar days upon complete warranty</p> <p style="text-align: right;">LESS:                      EWT 2%      1,285.71                      GMP 5%      3,214.29</p> <p>PR #                      19-0566 dtd. 10/28/19 CorMar</p>	160.00	72,000.00
					72,000.00
					4,500.00
					<b>67,500.00</b>

**Terms & Conditions:**

- The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
- If the date of receipt of the Job Order (J.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledge to have been received by a representative either through fax or e-mail
- Delivery of the above item(s) shall be made within the prescribed schedule dates. Supplier are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall only be from 09:00 to 11:30 a.m. and 1:30 to 3:00 p.m. during Mon/Wed/Fri (MWF). All item(s) shall be delivered and accepted by the PSMD at 15th Floor, Room 1501 Citystate Ctr. Bldg., Pasig City.
- Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery. With provision for a back-up unit in case of repair.
- 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 or 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 which 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.
- In all cases, the request for extension should be submitted before the lapse of the original delivery date. The maximum allowable extension shall not be longer than the initial delivery period as stated in the original contract.

2.1 = 247

Very truly yours,

*[Signature]*  
**JOSEPH O. VERGARA**  
 Head, SBAC & Procurement

Certified Budget Available:	Funds Available in the amount of:	Php72,000.00	APPROVED:
<p><i>[Signature]</i>  <b>CORAZON M. TABULAO</b>                  Fiscal Controller III</p>		<p><i>[Signature]</i>  <b>LILIA R. GARRIDO</b>                  Fiscal Controller III</p>	<p><i>[Signature]</i>  <b>BGEN AUGUSTUS H DE VILLA MD AFP (RET)</b>                  Acting Executive Vice-President and COO                  HEAD OF THE AGENCY                  or Authorized Representative</p>
Within the COB: <u>2019</u> Expense Code: <u>302990102 (MPE) T2</u> Budget: <u>12,000.00 -</u> Remarks: <u>changed to CORMAR</u>			
Received copy of J.O on _____		CONFORME: <i>[Signature]</i> <b>RICO B. PUBLICO</b> Print Name and Signature of Supplier/Representative	12/10/19