

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 ASIA SUMMIT CORPORATION Job Order No.: 19-12-136  
 Address 7B Lot 8 Blk. 58 Phase IV Rocarte St/ AFPOVAL Western Bicutan, Taguig Date: December 2, 2019  
 Tel.Fax No. 839-0601 Terms of Payment: On Account

Supplier Registered with: PHILHEALTH Mode of Procurement: Small Value Procurement

Please deliver to this office within (45) calendar days and an additional (7) calendar days for the presentation and approval of sample upon approval of the following

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
1	1,500	pcs	<p><b>PROCUREMENT OF CORPORATE JACKET</b></p> <p>Specs:                      Size: Various Sizes                      Color: Black with two white piping                      Pattern: Solid                      Fabric Material: Poly Cotton, please refer to the design                      Size of PhilHealth Logo: 2.45 inches (W) x 0.9 inches (H)                      Others: Full Sleeves with zipper                      3 inches wide embroidered Philhealth Website text at the upper back                      Packaging: Individual Polybag                      Warranty: (2) months upon complete delivery</p> <p>LESS:                      EWT 2% 15,107.14                      GMP 5% 37,767.86</p> <p>PR #                      19-0613 dtd. 11/07/19 Cormar</p>	564.00	846,000.00
					846,000.00
					52,875.00
					<b>793,125.00</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.

Very truly yours,

*Joseph O. Vergara*  
**JOSEPH O. VERGARA**  
 Head, SBAC & Procurement

Certified Budget Available:	Funds Available in the amount of:	Php846,000.00	APPROVED:
<i>Marcos M. Navarro</i> <b>MARCO M. NAVARRO</b> Division Chief	<i>Archilles L. Villasin</i> <b>ARCHILLES L. VILLASIN</b> Acting Division Chief AICD Controlship Department		<i>Corazon E. Jaime</i> <b>CORAZON E. JAIME</b> Acting Senior Manager, PRID HEAD OF THE AGENCY or Authorized Representative
Within the COB: <i>2019</i>	Expense Code: <i>502990/02 (MPB)</i>	Budget: <i>P 846,000.00</i>	
Remarks: <i>changed to WR MAR</i>			

Received copy of J.O on <i>12/15/19</i>	<i>Elena R. Cabrera</i> <b>ELENA R. CABRERA</b> 12/15/19	CONFORME: Print Name and Signature of Supplier/Representative
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