## REPUBLIC OF THE PHILIPPINES lippine Health Insurance Corporation

709 CityState Center Bldg. Shaw Blvd. Brgy. Oranbo, Pasig City Telefax No. 637-3158 637-4735

## **PURCHASE ORDER**

Supplier:	PHILCOPY	CORPORATION	Purchase Order No.:	05-021-19	
Address:	U2406 24/F	Medical Plaza Ortigas, San Miguel Ave. San Anton	io, Pasig City Date:	June 10, 1901	
Tel.Fax No.:	6872084/85		Term of Payment:	On Account	
Supplier Registered with:		PHILHEALTH	Mode of Procurement:	Small Value Procurement	
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30 working days Please deliver to this office within from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	8	units	PAPER SHREDDER, HEAVY DUTY	41,850.00	334,800.00
			Brand: DAHLE 40404		·
					334,800.00
			Note:		
			One (1) year warranty		
			LESS: EWT 1% 2,989.29		
			GMP 5% 14,946.43		17,935.72
					316,864.28
			PR #		
			19-0216 dtd. 05-15-19 -PRID		
L	L				

## Terms & Conditions:

- 1. 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.
- 2. If the date of receipt of the Purchase Order (P.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
- 3. 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.
- 4. Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- 5. 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.
- 6. 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.

  7. Warranty Security of 1% of gross amount (Section 62. Warranty of 2016 Revised IRR of RA 9184).

Ú5-606	Very	y truly yours,  ELY E. ROXAS
		Administrative Officer III
Certified Budget Available: Funds Available in the amount of:	Php334,800.00	APPROVED:
EDITHAO. RAMASTA RENNA GRACE Fiscal Controller IV For Fiscal Cont	Jolla F. DEL SOGORRO troller III	Guyen
	Į.	JOSEPH O. VERGARA
Within the COB: 2019	Head, SBAC	
Expense Code: 1060 5020 Loffin Sampmens)	HEAD OF THE AGENCY	
Budget: \$334,800 100	or Authorized Representative	
Remarks: Changed various office	,	
CONFORME:		Received copy of P.O.:
TRANGE MICHIE	A	DO NOT WRITE ON THE "DATE"
Signature over\Printed Name and Position o representative	f authorized	Date