## JOB ORDER

(Non - Inventoriable Items) OFFICE/DEPARTMENT: PRO 1

Supplier: INDUSTRIAL & TRANSPORT EQUIPMENT, INC

Rizal Street, Dagupan City Address:

Tel. Fax No.: Supplier Registered with:

540-2513 000-201-284-00001 VAT AUDIT TEAM R1-04 (PHIC Group)

COMMISSION ON AUDIT

RECEIVED BY:

Date: 12/10/2019

Term of Payment: Charge

Mode of Procurement: Direct Contracting

Please deliver to this office within 1 week upon approval

Note: Additional working days to submit for approval of text / sample.

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
	1	gal	Igmo Engine Oil	1,283.88	1,283.88
	1	ltr	Igmo Engine Oil	334.48	334.48
	1	рс	Oil Filter	1,450.96	1,450.96
	1	рс	Fuel Filter	609.58	609.58
	1	рс	Diesel System Cond	559.05	559.05
	1	рс	Break Cleaner	227.71	227.71
			Shop Material	38.64	38.64
			Labor: Perform 50,000 km check up	2,596.61	2,596.61
			Note*** Periodic Maintenance for Isuzu Crosswind CS-3662	TOTAL-L & M	7,140.91
			Less: TAX		
			VAT (5%/1.12)	318.79	318.79
			PR: 19-1204-0533 Requesting Unit: FOD-LHIO Eastern Pangasinan	Total-Net of Tax	6,822.12

## Terms & Conditions:

- 1 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.
- 2. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
- 3. 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 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 thier office or influence the actions of directors or employees, or create the appearance of a conflict of interest.
- 4 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 5 payment made "in cash" or "in check" three (3) calendar days.

6 Deliveries sh	Deliveries should be made within 8:00AM to 3:00PM on working days on or before the date stipulated in the PO.								
	ry per item will not be accept	BY THE AUTHORITY OF THE DCIV-MSD CHIEF							
e Authority of M2 V									
MARINEL C. BR	(VO)		CY	(NTHIA S. SANTOS) EDWARD Q. ESPIRITU					
Finest Controller			Div	vision Chief IV, MSD					
Certified Budget Availal	ole: Funds Avail	able in the amount of: 7 140-91		APPROVED:					
JOSE A. MONES	1	JANE C. RAGOS							
Fiscal Controller III	1	FC/FMS Chief							
	Ma	- TAR	_	ALBERTO C. MANDURIAO					
With in the COB:	U TOUR ON	BY THE AUTHORITY OF THE CHIEF, FMS		Regional Vice President, PRO1					
Expense Code:	100410VQQ	per volupo							
Bdget:	7,140.41	JOSE A. MONES		12-11-19					

FISCAL CONTROLLER III

Recevied copy of J.O. on

Remarks

CONFORME:

Signature over Printed Name of Supplier Representative

## INSTRUCTIONS ON HOW TO USE THIS FORM:

- 1. This form shall be used for the acquisition of services such as printing, renovation, etc.
- 2. This form shall be accomplished by the staff of the Procurement Section upon decision of the Division Chief & Senior Manager as to which supplier has submitted the lowest quotation and if it had met the required specs.
- 3. All other terms and conditions stated herein are valid upon completion of signatories of authorized personnel.