



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
LNU, Commercial Bldg., Francisco Duque St., Tapuac District Dagupan City

FEB 21 2019
3:57 pm

POMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: G.I.O. ENTERPRISES
Address: Arellano Bani, Dagupan City, Pangasinan
Tel.Fax No.: 523-5677
Supplier Registered with: 945-867-227-000 V

PO No. 2019-014
Date: 2/18/2019
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement-
Small Value Procurement

Please deliver to this office within 15 days upon approval of actual sample from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	1,000	pcs	Corporate Mug, ceramic mug with two sides, full color print (see attached layout/design)	65.00	65,000.00
			xxxxxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxxxxxxx	TOTAL	65,000.00
			Less: VAT (5%/1.12)	2,901.79	
			EWT (1%/1.12)	580.36	3,482.15
			PR No. 19-0125-0077		
			PURPOSE: Corporate give-aways for PhilHealth Members / Employers / Stakeholders / Partners during ALAGA KA and Corporate activities / events	TOTAL - NET	61,517.85

Terms & Conditions:

- 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.
- For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
- 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.
- 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 payment made "in cash" or "in check" three (3) calendar days.
- Deliveries should be made within 8:00AM to 3:00PM on working days on or before the date stipulated in the PO.

By the authority of the MSD Chief

Very truly yours,

EDWARD Q. ESPIRITU

AO IV / ASS Chief

CYNTHIA S. SANTOS

Division Chief IV / MSD Chief

Certified Budget Available: <u>65,000.00</u>	Funds Available in the amount of: <u>65,000.00</u>	APPROVED:
JOSE A. MONES Fiscal Controller III	JANE C. RAGOS FC IV / FMS Chief	
With in the COB: <u>2/18/19</u>		ALBERTO C. MANDURIAO Regional Vice President, PRO1
Expense Code: <u>502991.002</u>		
Bdget: <u>65,000.00</u>		
Remarks: <u>PAID</u>		
Conforme: <u>GINA JULIUS</u>	Date: <u>2/21/19</u>	
Signature over Printed Name and Position of Authorized Representative		Date