

Rush Pleasee

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

PDMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: VINZ IHAW-THAW SA PANDAYAN
Address: Pandayan, Pob. Alaminos, Pangasinan
Tel./Fax No.: _____
Supplier Registered with: 927-796-859 NV

PO No. 2019-123
Date: 5/23/2019

Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement-
Small Value Procurement

Please deliver to this office within May 25, 2019 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	15	pax	MEALS (Breakfast)	100.00	1,500.00
	15	pax	MEALS (AM Snacks)	80.00	1,200.00
	15	pax	MEALS (Lunch)	220.00	3,300.00
	15	pax	MEALS (PM Snacks)	80.00	1,200.00
	15	pax	MEALS (Dinner)	100.00	1,500.00
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL	8,700.00
			Less: VAT (3%)		261.00
			PR No. 19-0522-0281		
			PURPOSE: GAD Family Orientation for LHIO Western Pangasinan	TOTAL	8,439.00

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 their 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 - 12:00NN and 1:00PM - 3:00PM on working days on or before the date stipulated in the PO.
- Partial delivery per item will not be accepted.

Very truly yours,

CYNTHIA S. RANTON
Division Chief IV / MSD CH

Certified Budget Available: JOSE R. MONES Fiscal Controller III With in the CDB: Expense Code: Budget: Remarks: Conforms: Signature over Printed Name and Position of Authorized Representative: <u>GAY B. GARCIA</u> Date: <u>5/24/19</u>	Funds Available in the amount of: COMMISSION ON AUDIT AUDIT TEAM R1-04 (PHIC Group)  MAY 24 2019 RECEIVED BY: <u>As</u>	APPROVED: ALBERTO C. MANDURIAO Regional Vice President, PRO 1 ON THE AUTHORITY OF THE RVP MARICAR M. ARZADON M.D. MEDICAL OFFICER III Date: <u>5/23/19</u>
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