

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: GACKEN (Philippines), Inc.

PO No. 2019-205

Address: Dagupan City

Date: 9/18/2019

Tel./Fax No.: 522-3228 / 540-2056

Terms of Payment: Charge

Supplier Registered with: 004-475-204-004 V

Mode of Procurement: Direct Contracting

Please deliver to this office within 15 days from receipt hereof the following:

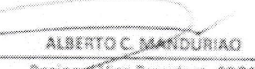
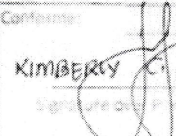
NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	16	carts	INK For Duplo Machine L-520, DC-14 (600ml) Black (05-037)	974.00	15,584.00
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX		
			Less: VAT (5%/1.12)	695.71	
			EWT (1%/1.12)	139.14	834.85
			PR No. 19-0822-0387		
			PURPOSE: Ink for use for printing of various forms in BAS and HHCs		
			TOTAL - NET		14,749.15

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 reserve 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 issued.
- 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" within (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.

Very truly yours,


CYNTHIA S. SANTOS
Division Chief IV / MSD C&I

Certified Budget Availabilty	Funds Available in the amount of: <u>15,584.00</u>	APPROVED:
 JOSE A. MONES Fiscal Controller	 JANE C. RAGOS FC IV / FMS Chief	 ALBERTO C. MANDURIAO Regional Vice President, PRO1
 COMMISSION ON AUDIT AUDIT TEAM R1-04 (PHIC Group) SEP 23 2019 RECEIVED BY: <u>Ae</u>		
Work in the UOB: Expenditure: Budget: Remarks:		
Confirmer:  KIMBERLY C. SAXSON / SALES SECRETARY Signature of: Printed Name and Position of Authorized Representative		
Date: September 19, 2019		Date: <u>9/18/19</u>