COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)

NOV 06 2019

RECEIVED BY:

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

FORM-P-006

PURCHASE ORDER - SUPPLEMENTAL

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT

Supplier: LENOX HOTEL
Address: Rizal St., Dagupan City
Tel.Fax No.: 515-8889/7094-96
Supplier Registered with: 113-888-385-001 V

PO No. 2019-255_S220
Date: 10/30/2019
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement-Lease of Privately-Owned Venue

Please deliver to this office within *on October 22, 23, 24, 2019* **from receipt hereof the following:**

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	22	pax	MEALS (AM & PM Snacks, Lunch) on October 22, 2019	650.00	14,300.00
	26	pax	MEALS (AM & PM Snacks, Lunch) on October 23, 2019	650.00	16,900.00
	5	pax	MEALS (AM & PM Snacks, Lunch) on October 24, 2019	650.00	3,250.00
			* With Free Flowing Coffee		
			xxxxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxx	TOTAL	34,450.00
			Less: VAT (5%/1.12)	1,537.95	
			EWT (1%/1.12)	307.59	1,845.54
			PR No. 19-1028-0483		
			PURPOSE: Conduct of Capacity Building with Health Care Institutions on Claims Processing in Pangasinan and La Union	TOTAL	32,604.46

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.
5. 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.**
6. 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.
7. Partial delivery per item will not be accepted.

By the Authority of the [illegible] 10/30
MARIMEL C. BRAVO
Fiscal Controller II

By the authority of the MSD Chief
EDWARD Q. ESPIRITU 10/30/19
AO IV / ASS Chief / OIC-OMSD Chief

Very truly yours,
CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available:

JOSE A. MONES
Fiscal Controller III

Funds Available in the amount of: 34,450

JANE C. RAGOS
FC IV / FMS Chief

By the Authority of the FMS Chief:
JOSE A. MONES
Fiscal Controller III

With or the COS:
Expense Code:
Object:
Remarks: W/C BUDGET IMPLICATION

CHANGE OF RATES. FOT

Conforme:
VICAR E. LIBATON
SALES AND MARKETING MANAGER Date: 11/5/19
Signature over Printed Name and Position of Authorized Representative

APPROVED:

Marissa B. Arzadon, M.D.
Regional Vice President, PRO1

10/30/19
Date