COMMISSION ON AU AUDIT TEAM R1-04 (PHIC	
-NOV 202019	
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Republic of the Philippines

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

## PURCHASE ORDER

## OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT

Supplier:	EL JARDINE FOOD CATERING & MANAGEMENT SERVICES	PO No.	2019-275
Address:	Alvear St. West, Lingayen, Pangasinan	Date:	11/8/2019
Tel.Fax No.:	0921-565-1565 / 0917-416-0751	Terms of Payment:	Charge
Supplier Reg	stered with: 922-084-772-000 NV	Mode of Procurement:	Negotiated Procurement-
			Small Value Procurement

## Please deliver to this office within on December 2-3, 2019 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	20	рах	MEALS (AM & PM Snacks, Lunch)	450.00	18,000.00
			xxxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxxxx	TOTAL	18,000.00
			Less: VAT (3%)	540.00	
			EWT (1%)	180.00	720.00
			PR No. 19-1030-0488		
			PURPOSE: Orientation on GAD Basic Concept for newly hired	TOTAL	17,280.00
			Employees		,======

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 MSD Chief:	Very truly yours,
	6.8.8	
	EDWARD Q. ESPIRITU	<u>CYNTHIA S. SANTOS</u>
	AO IV / ASS Chief / OIC-OMSD Chief	Division Chief IV / MSD Chief
Certified Budget Available: Funds Available in the amount of:	/8-000 °	APPROVED:
JOSEA. MONES JANE C. RAGOS		
Fiscal Controller III FC IV / FMS Chief		
With in the COB:		
Expense Code:		ALBERTO C. MANDURIAO
Bdget:		Regional Vice President, PRO1
Remarks:		BY THE AUTHORITY OF THE PAP
Conforme:		n
	Date: 1 1. 1. 1.	JANETTE D. MANAOIS, MD
Signature over Printed Name and Position of Authorized Repres	sentative	MEDICAL SRECIALIST IV