

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

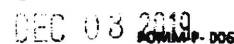
Supplier: UNICOM OFFICE DESIGNS

Address: G/F OAC Bldg., San Miguel Ave., Ortigas Center, Pasig City

Tel.Fax No.: (02) 637-5894 / 95

Supplier Registered with: 205-467-192 V

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



RECEIVED BY:
PO No. 2019-277

Date: 11/8/2019

Terms of Payment: Charge

Mode of Procurement: Negotiated Procurement-
Small Value Procurement

Please deliver to this office within 30 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
2	units	STEEL OPEN SHELVES, Five (5) to Six (6) adjustable shelves plus One (1) top shelf bolted to slotted 1 1/2' x 1 1/2' x 2mm angular posts, all shelves shall be supported with corner plates for stability, shelves shall be gauge # 20 with stiffeners welded beneath for inflexibility, anti-rust protection and powder coated in light gray finish		10,500.00	21,000.00
1	unit	TABLE: Conference Table "U-Shaped" Table, 8 to 12 seaters		34,000.00	34,000.00
1	unit	TABLE: Conference Table "Oval-Shaped" Table, 6 to 10 seaters		20,000.00	20,000.00
		XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX		TOTAL	75,000.00
WARRANTY: 1 YEAR		Less: VAT (5%/1.12)		3,348.21	
		EWT (1%/1.12)		669.64	4,017.85
		PR No. 19-0116-0041			
		PURPOSE: For PRO 1 use		TOTAL	70,982.15

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 their 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

MARINE L. BRAVO

Fiscal Controller

By the authority of the ~~MSD~~ Chief:

EDWARD Q. ESPIRITU

AD IV / ASS Chief / OIC-OMSD Chief

Very truly yours,

CYNTHIA S. SANTOS

Division Chief IV / MSD Chief

Certified Budget Available:

Funds Available in the amount of: 75.000

JOSE A. MONES

Fiscal Controller III

JANE C. RAGOS

FC IV / FMS Chief

BY THE AUTHORITY OF THE CHIEF, FMS

JOSE A. MONES
FISCAL CONTROLLER III

With in the COB:

Expense Code:

Belgium

Remarks:

Conforme:

Signature over Printed Name and Position of Authorized Representative

APPROVED:

ALBERTO C. MANDURIAO
Regional Vice President, PRO1

Date