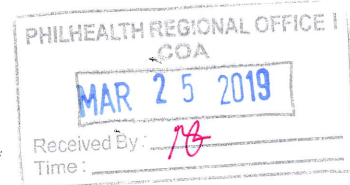




Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
LNU, Commercial Bldg., Francisco Duque St., Tapuac District Dagupan City



PD/MW-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: J-NIMRO'S CATERING SERVICES

PO No. 2019-036

Address: Brgy. 17 Abadilla St., Laoag City

Date: 3/19/2019

Tel/Fax No.:

Terms of Payment: Charge

Supplier Registered with: 302-951-706-000 NV

Mode of Procurement: Negotiated Procurement

Small Value Procurement

Please deliver to this office within on March 20, 25 & 26, 2019 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	217	pax	MEALS (Adams on 3/20/19)	80.00	17,360.00
	100	pax	MEALS (Currimao on 3/25/19)	80.00	8,000.00
	100	pax	MEALS (Pinili on 3/26/19)	80.00	8,000.00
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL	33,360.00
			Less: VAT (3%)	1,000.80	
			EWT (1%)	333.60	1,334.40
			PR No. 19-0306-0169		
			PURPOSE: ALAGA KA Activities in LHIO Ilocos Norte	TOTAL	32,025.60

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. SANTOS

Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: 33,360.00

JOSE A. MONES
Fiscal Controller III

JANE C. RAGOS
FC IV / FMS Chief

With the COA: CY 2019

Expense Code: 1029901002

Budget: 33,360

Remarks: ALAGA KA / STAB 2

Conformer:

MICHELLE A. AGUIPAY

Date: 3/20/19

Signature over Printed Name and Position of Authorized Representative

APPROVED:

ALBERTO C. MANDURIAO
Regional Vice President, PRO I

3-19-19

Date