	COMMISSION ON AUDIT AUDIT TEAM R1-04 (PHIC Group)
N. N	Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION LNU, Commercial Bldg., Francisco Duque St., Tapuac District Dagupan City

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT

Supplier	CSI WAREHOUSE CLUB INC.	PO No.	PO No. 2019-065		
	Lucao District, Dagupan City	Date:	4/22/2019		
Address:		Terms of Payment:	COD		
Tel.Fax No.:		Mode of Procurement:	Negotiated Procurement-		
Supplier Reg	istered with: <u>005-333-806-000 V</u>		<b>Small Value Procurement</b>		

## Please deliver to this office within on April 22 - May 8, 2019 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	7,400	рах	MEALS (Snacks)	12.67	93,758.00
	7,400	pux	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	TOTAL	93,758.00
	、 、		Less: VAT (5%/1.12)	4,185.63	
			EWT (1%/1.12)	837.13	5,022.76
			PR No. 19-0416-0233		
			PURPOSE: Conduct of ALAGA KA program for indigent members in San Fabian, Pangasinan	TOTAL - NET	88,735.24

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.
- 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 Δ 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.
- Deliveries should be made within 8:00AM to 3:00PM on working days on or before the date stipulated in the PO. 6

		Very truly yours,
		CYNTHIA S. SANTOS
		Division Chief IV / MSD Chief
1	Certified Budget Available: Funds Available in the amount of: 93758	APPROVED:
/	Mun (A	ON THE AUTHORITY OF THE A RV?
	JOSE A. MONES JANE C. RAGOS	
	Fiscal Controller III FC IV / FMS Chief	MARICAR M. ARZADON, MA
	Davú	MEDICAL AFFICERWI
	With in the COB:	ALBERTO C. MANDURIAO
	Expense Code:	
	Bdget:	Regional Vice President, PRO1
	Remarks:	BY THE AUTHORITY OF THE
	++++++++++++++++++++++++++++++++++++++	mr.
	Conforme:	Maricar M. Arzadon, M.D.
		Medical Officer VII
	RICMM/M. SMUMODIN Date: 9/23/19	U
	Signature over Printed Name and Position of Authorized Representative	Date
	Signature over Printed Marie and Fostion of Mathematica representation	