


PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: KCS BURGER
Address: Tapuac District, Dagupan City
Tel.Fax No.: 0906-2720-830 / 09088827643
Supplier Registered with: 246-796-037-001 NV

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

 **APR 25 2019** POMM-P- 006

RECEIVED BY: MA

PO No. 2019-067
Date: 4/23/2019
Terms of Payment: COD
Mode of Procurement: Negotiated Procurement-
Small Value Procurement

Please deliver to this office within on April 27, 2019 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	354	pax	MEALS (AM Snacks - Classic Burger with coke mismo)	69.00	24,426.00
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL	24,426.00
			Less: VAT (3%)	732.78	
			EWT (1%)	244.26	977.04
			PR No. 19-0404-0218		
			PURPOSE: Conduct of PRO 1's Gender and Development (GAD) Family Orientation Day. In line with our continuing effort to instill gender awareness among our employees, PRO 1 shall be conducting several activities including the organization of a Family Orientation Day	TOTAL - NET	23,448.96

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 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 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 to 3:00PM on working days on or before the date stipulated in the PO.

Very truly yours,


CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: 24,426.00

 **JOSE A. MONES**
Fiscal Controller III

 **JANE C. RAGOS**
FC IV / FMS Chief

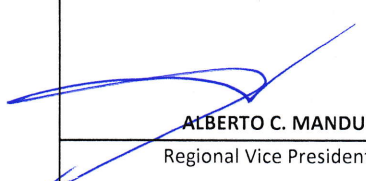
With in the COB: 2019
Expense Code: 11000000000000000000
Bdget: 24,426.00
Remarks: 440

Conforme:


Signature over Printed Name and Position of Authorized Representative

Date: 4-24-19

APPROVED:


ALBERTO C. MANDURIAO
Regional Vice President, PRO1

Date

19040183