Republic of the Philippines

## PHILIPPINE HEALTH INSURANCE CORPORATION

2nd and 3rd floor, BG investment Corporation Bldg. Gov. Lim Ave.

Zamboanga City

Telephone No. (062) 992-3569

Fax No. (062) 992-2739

## Purchase Order

|  | Purchase Order | RONO: 10-02-001 &                      |
|--|----------------|--|
|  |                | F.O. No.: 11 - 33 - 7                  |
| Supplier: Eiblin Enterprises               |                | Date: February 7, 2019                 |
| Address: 150 Gov. Alvarez St., Zamboanga G | <u> </u>       |  |
| Tel./Fax No.: 992-1165                     | Mode           | of Procurement: Negotiated Procurement |
| Supplier Registered with: VAT              |                | Small Value Procurement                |
| 170-204-298-000                            |                | owing:                                 |

Please deliver to this office within 15 working days from receipt hereof the following:

|     | 1                     | UNIT                         | 15 working days from receipt hereof the following:  ITEM DESCRIPTION                               | UNIT<br>PRICE | TOTAL<br>AMOUNT      |
|-----|-----------------------|------------------------------|--|---------------|----------------------|
| NO. |                       | 11 10 5 /8 plain 70gsm, 1000 | 1,380.00   | 114,540.0     |                      |
| 1   | 83                    | box                          | Conitnuous Form, 11 x 10-5/8, plain, 70gsm, 1000 sets per box  *********************************** |               | 114,540.0<br>6,136.0 |
|     |                       |                              | Less: 1% EWT 1,022.68  |               | 108,403.9            |
| V   |                       |                              |  |               |                      |
|     | Company of the second |                              | Note: Cut-off delivery time: 3:00 PM   |               |                      |

- 1. The agency shall impose penalty in an amount equivalent to 1/10 of 1 percent of the total value of undelivered order for each day of the delay as liquidated damages.
- 2. Render your bills in triplicate copies including the original. 3. If the date of receipt of the P.O. by the dealer is not indicated, it shall be deemed received on the 10th working day from
- 4. For imported items, IMPORTANT DOCUMENTS specially showing the condition, serial numbers of the equipment purchased, and tax receipts, should be submitted by the supplier.
- 5. In case of return, all expenses shall be shouldered by the supplier to and from.
- 6. No cancellation is allowed upon serving of P.O.

The contracting parties undertake to comply to Office Order No. 0018-2015 entitled "Reiteration of PhilHealth No Gift Policy (Revision 1)" which is deemed incorporated into this Contract. No PhilHealth personnel shall solicit, demand, or accept, directly or indirectly, any gift from any person, group, association, or juridical 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 or directors or employees, or create the appearance of a conflict of interest.

| their office or influence the actions of | r directors or employees, of create the appropriate | Very truly yours,   |
|--|---|---|
| Funds Available in the amount of:        | PHP114.540.00                                       | MARINA JOY A. FABELLA<br>Division Chief IV, MSD                           |
| ROSEMIN E. DAMSID  Fiscal Controller IV  | APPROV <del>ED.</del>                               |   |
| Prepared by:                             |   | ROMEO D. ALBERTO  Regional Vice President  (Or Authorized Representative) |
| Administrative Officer I                 | <del></del>   | CONFORME:  CAN A YEAR  Fint Name and Signature of                         |
| Received copy of P.O. on                 | – Pi  | Supplier / Representative   |