REPUBLIC OF THE PHILIPPINES

Philippine Health Insurance Corporation
709 CityState Center Bldg.
Shaw Blvd. Brgy. Oranbo, Pasig City
Telefax No. 8637-3158
PURCHASE ORDER

			PURCHASE ORDER				
Supplier:		TERWO	ORLD ENTERPRISES	Purchase Order No.:	03-0	10-20	
Address: 1607 Pasong Tamo Tower, 2210 Chino Roces Ave. Makati City				Date:	March 23, 2020		
Tel.Fax 1		21-3413		Term of Payment:	nt: C.O.D		
Supplier Registered with PHILHEALTH Mode of Pr					Emergeno	y Purchase	
			•	BAC-	GS Resolution	No. 02, s. 2020	
Dia		a & Al?	to affirm within	GPI	PB Resolution	No. 03, s , 2020	
Please deliver to this office within As per schedule from receipt here						wing	
NO.	QTY	UNIT	ITEM DESCRIPTION		UNIT	TOTAL	
1	90.000	PCS	MEDICAL/SURGICAL FACE MASK (50 PCS/BOX)		PRICE 24.16	2,174,400,00	
			Packing: 50 PC\$/BOX = 1,800 BOXE\$				
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						2,174,400,00	
			LESS: EWT 1%	19,414.29			
			GMP 5%	97.071.43		116,485.72	
			PR # .		ŀ	2,057,914.28	
		ŀ	20-0024 did. 03-03-20		F	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			20-0030 dtd, 03-23-20		ľ		
2. If the date of receipt of the Purchase Order (P.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowled have been received by a representative either through fax or e-mail 3. Delivery of the above item(s) shall be made within the prescribed schedule dates. Supplier are advised to inform Procurement Section at least two (2) days before the delivery (Se of elevator shall only be from 09:00 to 11:30 a.m. and 1:30 to 3:00 p.m. during Mon/Wed/Fri (MWF). All item(s) shall be delivered and accepted by the PSMD(all folion, Room 1501 Citystate Ctr. Bidg., Pasig City. 4. Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods. 5. Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery. With provision for a back-up unit in case of tepair. — 2070 6. The contracting parties undertake to comply with Office order No. 0018-2015 entitled (Reiteration of Philhealth No Gift Policy (Revision 1) which is deemed incorporated into this Pontract, No Philhealth personnel shall solicit, demand, or accept, directly or indirectly, any gift from any person, group or association, of pridical 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 which 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. 7. In all cases, the request for extension should be submitted before tha lapse of the original delivery date. The maximum allowable extension shall not be longer than the initial delivery period as stated in the original contract. Very truly yours,							
Certified Budget Ayaitable: Funds Available in the amount of: Php2,1,74,400,00 APPROVED:							
Within the Co Expense Cod Budget:	Division OB: e: 171 0 2, 171 hong l	NAVARR TChief 707 03050 1,400	ALFREDO C. REYES JR. Acting Division Chief	BGEN RICARDS C. KOR Presiden and Chie HEAD OF TH	ALES, AFP (f Executive C IE AGENCY epresentative		
CONFORM		-		Received copy of P.O.:			
1	received copy of P.O.;						

Date

Signature over Printed Name and Position of authorized

representative