

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

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

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



FEB 21 2020

FORM-P-006

RECEIVED BY: MB

Supplier: **LENOX HOTEL**
 Address: **Rizal St., Dagupan City**
 Tel. Fax No.: **515-8889/7094-96**
 Supplier Registered with: **113-888-385-001 V**

PO No. **2020_016**
 Date: **2/20/2020**

Terms of Payment: **Charge**
 Mode of Procurement: **Negotiated Procurement-
 Lease of Privately-Owned Vehicle**

Please deliver to this office within **on February 26 & 28, 2020** from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	34	pax	MEALS (AM Snacks and Lunch) on February 26, 2020	550.00	18,700.00
	54	pax	MEALS (AM Snacks and Lunch) on February 28, 2020	550.00	29,700.00
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL	48,400.00
			Less: VAT (5%/1.12)	2,160.71	
			EWI (1%/1.12)	432.14	2,592.85
			PR No. 20-0210-0108		
			PURPOSE: Conduct of Dialogue with COHS and MDs on UHC Implementation	TOTAL	45,807.15

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: ₱8,400

JOSE A. MONES
 Fiscal Controller III

JANE CRAGOS
 FC IV / FMS Chief

With in the COB: 2/20/2020
 Expense Code: 2020-016
 Budget: 2020-016
 Remarks: 2020-016

Conformer:

JEAN E. LABATON

Date: **2/21/20**

Signature over Printed Name and Position of Authorized Representative

APPROVED:

ALBERTO C. MANDURIAO
 Regional Vice President, PRO1

2/20/2020

Date