



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

PhilHealth Regional Office IVA
Lucena Grand Central Terminal, Brgy. Haying Dupay, Lucena City
Call Center (02) 8441-7442 | Contact Number (042) 373-7554
www.philhealth.gov.ph | region4a@philhealth.gov.ph



JOB ORDER

(Non - Inventonable Items)

OFFICE/DEPARTMENT: MSD-GSU

Supplier:	PHILCOPY CORPORATION	Work Order No.:	20-03-019
Address:	Abadilla Bldg. Hermana Fausta St, Lucena City	Date:	08/17/20
Tel. Fax No.:	042-373-7839	Term of Payment:	On account
Supplier Registered with:	DTI	Mode of Procurement:	Direct Contracting

Please deliver to this office within 30 days upon approval.

Note: Additional N/A working days to submit for approval of text / sample.

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
			KYOCERA-MITA LASER PRINTER FS-4100DN serial no.: LQV4902786 (08-0715IT1407043) ✓ LQV4802704 (08-0715IT1407024) X LQV4902804 (08-0715IT1407045) ✓ LQV4802698 (08-0715IT1407049) ✓ L5R330146 (0813IT1407001) X		
			<u>Material:</u>		
1	1	pc	Kyocera-mita parts clutch 20-2W Z35R	526.00	526.00
2	1	pc	Kyocera-mita parts drive feed assy sp	3,774.00	3,774.00
3	1	pc	Kyocera-mita parts clutch 50 Z35R sp	3,401.00	3,401.00
			nothing follows		
					7,701.00
			Less Taxes: VAT 5%	343.79	
			EWT 1%	68.76	412.55
					7,288.45
			<u>Labor/Service:</u>		
4	1	lot	Service charge	1,000.00	1,000.00
5	1	lot	Service charge	2,000.00	2,000.00
			nothing follows		
					3,000.00
			Less Taxes: VAT 5%	133.93	
			EWT 2%	53.57	187.50
					2,812.50
			Job Request no. 2020-02-018 dated 6/26/2020	NET AMOUNT:	10,100.95

Terms & Conditions:

1 The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages





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UNIVERSAL HEALTH CARE

2. If the date of receipt of the Job Order (J.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledged to 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. Suppliers are advised to inform Procurement Section at least two (2) days before the delivery. All item/s shall be delivered and accepted by the Procurement Section at PRO IV-A, Lucena Grand Central Terminal Brgy. Ilayang Dupay, Lucena 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.
6. In case the series of layout/design presented by the supplier does not satisfy the end-user, the Corporation has the right to cancel the Job Order (J.O.).
7. Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.
8. 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 Contract. No Philhealth personnel shall solicit, demand, or accept directly or indirectly, any gift from any person, group or 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 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.

Very truly yours,

BENJIE A. CUVINAR
OIC, MSD

Certified Budget Available: MA. PAMELA B. LEYNES Budget Officer/Designate		Funds Available in the amount of: <u>10,701.00</u> ARON R. RIANO Fiscal Controller IV	APPROVED: EDWIN M. ORINA, M.D. RVP, PRO IVA
With in the COB:	<u>2020-COB</u>		
Expense Code:	<u>5 02 13 050 02</u>		
Budget:	<u>10,701.00</u>		
Remarks:			
Received copy of J.O. on <u>9/2/20</u> Date		CONFORME: Signature over Printed Name of Supplier / Representative	

