



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
 PhilHealth Regional Office IVA
 Lucena Grand Central Terminal, Brgy. Bayang Dupay, Lucena City
 Call Center 102 * 8441-7442 | Contact Number (042) 373-7554
 www.philhealth.gov.ph | region4.philhealth.gov.ph



UNIVERSAL HEALTH CARE

PURCHASE ORDER

OFFICE OF THE DEPARTMENT SECRETARY

Supplier: **PHILIPPINE DUPLICATORS INC.**
 Address: **C/O. Bldg. KM 14, West Service Road Edison Avenue, Brgy. Merville, Paranaque City**
 Tel/Fax No: **02-822 2601-08**
 Supplier Registered with: **Security and Exchange Commission**

PO No: **20-01-032**
 Date: **July 20, 2020**

Terms of Payment: **on account**
 Mode of Procurement: **direct contracting**

Please deliver to this office within 30 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	2	pc	Master Roll, Gestetner Copier (CPM125)	6,363.00	12,726.00
2	19	ctdg	Gestetner Ink CPM125	2,325.00	44,175.00
					56,901.00
			Less Taxes: 5% VAT	2,540.22	
			1% IWT	508.04	3,048.26
			TOTAL AMOUNT		53,852.74
			Purchase Request No: 2020-01-017		
			Date: 13-Mar-20		

Terms & Conditions:

- The agency will impose equivalent to 1% of 1 percent of the unit price of the goods not under the cash discount as liquidated damages.
- If the date of receipt of the Purchase Order (PO) by the supplier is not indicated, it shall be deemed received on the date it was acknowledged to have been received by a representative either through fax or email.
- Delivery of the above goods shall be made within the delivery period from Monday to Friday 8am to 5pm. Supplier are advised to submit the document signed and dated by the delivery person to the delivery address. All items shall be received and accepted by the Procurement and Supply Unit at PhilHealth Regional Office IVA, Lucena Grand Central Terminal, Brgy. Bayang Dupay, Lucena City.
- Delivery Receipt and Sales Invoice shall be required to complete completion of the goods.
- Defective, upon receipt or non-compliance of goods as to specification when quoted shall be rejected and returned at the time of delivery. With provision for a look up on the basis of repair.
- The contractor shall undertake compliance with Office Order No. 0018-2015 entitled Regulation of PhilHealth No. Call Policy (Revision 2) which is deemed incorporated into this Contract. No PhilHealth personnel shall grant, demand, or accept, directly or indirectly, any gift from any person, group or association or institution, whether in 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,

BENIE A. CUVINAR
 OIC, MSD

Certified Budget Available MA. PAMELA B. LEYNES Fiscal Examiner IV Date on this: 2020-07-08 Expense Code: 5020301001 Budget: 56,901.00 Remarks:	Funds Available in the amount of: 56,901.00 ARON E. RIANO Fiscal Controller IV	APPROVED: EDWIN M. ORINA, M.D. RVP, PRO IVA
Contracted: Pamela B. Lynes Signature over Printed Name and Position of Authorized Representative		Received Copy of PO: July 28, 2020 Date



PhilHealth Official: info@philhealth.gov.ph | www.philhealth.gov.ph | region4.philhealth.gov.ph

PHILHEALTH REGION IVA
Procurement Unit
RECEIVED

AUG 04 2020

ALLAN JEFFREY DATINGUINO
 Name & Signature