



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
 PhilHealth Regional Office IVA
 Lucena Grand Central Terminal, Brgy. Ilayang Dupay, Lucena City
 Call Center (02) 8441-7442 | Contact Number (042) 373-7554
 www.philhealth.gov.ph | region4@philhealth.gov.ph



PURCHASE ORDER

OFFICE/DEPARTMENT: MSD-Admin

Supplier: **MICRO PACIFIC TECHNOLOGIES AND SYSTEMS CORPORATION**
 Address: 2F Chemphil Building, 851 A. Amabil Avenue, Brgy. San Lorenzo, Makati City
 Tel/Fax No.: (02) 840-4563 / (02) 840-4601 / (02) 840-4787 loc 133
 Supplier Registered with: Security and Exchange Commission

PO No. **20-01-041**
 Date: **August 5, 2020**
 Terms of Payment: **on account COD**
 Mode of Procurement: **local shopping**

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

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	9	Cart	INK CARTRIDGE (For Existing units of Printers) for HP 934XL BLACK	1,700.00	15,300.00
2	5	Cart	INK CARTRIDGE (For Existing units of Printers) for HP 935XL CYAN	1,100.00	5,500.00
3	5	Cart	INK CARTRIDGE (For Existing units of Printers) for HP935XL MAGENTA	1,100.00	5,500.00
4	5	Cart	INK CARTRIDGE (For Existing units of Printers) for HP935XL YELLOW	1,100.00	5,500.00
5	40	cart	TONER CARTRIDGE (for existing units of Printers) for HP37A	9,800.00	392,000.00
6	4	cart	TONER CARTRIDGE (FOR NEW PRINTER MODELS) for HP PRO M254NW, HP 202A Black	3,440.00	13,760.00
ORDER BACK 45-60 days lead time					437,560.00
Less Taxes: 5% VAT				19,533.93	
1% EWT				3,906.79	
TOTAL AMOUNT					414,119.28
Purchase Request No: 2020-01-059					
Date: 9-Jul-20					

Terms & Conditions:

- The agency shall impose equivalent to 1/10 of 1 percent of the total value of the undelivered order for each day of delay as liquidated damages.
- If the date of receipt of the Purchase Order / PO 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 email.
- Delivery of the above item(s) shall be made within the delivery period from Mondays to Fridays 8am to 5pm. Supplier are advised to inform Procurement Section at least two (2) days before the delivery. All item(s) shall be delivered and accepted by the Property and Supply Unit at PhilHealth Regional Office IV-A, Lucena Grand Central Terminal, Brgy. Ilayang Dupay, Lucena City.
- Delivery Receipt and Sales Invoice shall be required to ensure complete delivery of the goods.
- 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 repair.
- The contracting parties undertake to comply with Office Order No. 0014-2015 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/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 Fiscal Examiner A	Funds Available in the amount of: 437,560.00	APPROVED: EDWIN M. ORINA, M.D. RVP, PRO IVA
With in the COB: 2020 COB		
Expense Code: 5020301002		
Budget: 437,560.00		
Remarks:		
Conforms to: Irvin John Repata / account executive	Received Copy of PO: 8/12/2020	
Signature over Printed Name and Position of Authorized Representative	Date	



PHILHEALTH REGION IV-A
 Procurement Unit
RECEIVED

ALLAN JEFFREY DATINGUINO
 Name & Signature

SEP 15 2020



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UNIVERSAL HEALTH CARE

CERTIFICATE OF AVAILABILITY OF FUNDS (CAF)

Cost Center	ADMIN	ROF#:	2020-0219	08/07/2020
		CAF#:	2020-0219	08/07/2020
Particulars			Account Code (to be filled out by Budget)	Amount
PAYMENT OF PROCUREMENT OF IT SUPPLIES OF PRO IVA.			5020301002	₱437,560.00
Payee: MICRO PACIFIC TECHNOLOGIES AND SYSTEMS CORPORATION				
Reference: 20-01-041				
TOTAL				₱437,560.00
REQUESTED BY		FUNDS AVAILABLE		CERTIFICATION
Certified: Charges to budget necessary, lawful and under my direct supervision		Certified: Budget available and earmarked for the purpose, as indicated above		Certified: Funds available for disbursement herein described; in the amount specified
Signature:		Signature:		Signature:
Printed Name: Joseph Adrian R. Rejano		Printed Name: Ma. Pamela B. Leynes		Printed Name: Aron R. Riano
Position: AO III		Position: Budget Officer - Designate		Position: Fiscal Controller IV
Office: ADMIN		Office: MSD-FMS		Office: MSD-FMS
Date:		Date:		Date:
Remarks:		Remarks:		Remarks:





APPROVED BUDGET FOR THE CONTRACT (ABC)
PROCUREMENT OF OFFICE SUPPLIES
 within PRO IVA

Contract Duration: CY 2020

ABC No.
 Date:

2020-053
7/6/2020

ITEM NO. (a)	DESCRIPTION (b)	QTY (c)	UNIT (d)	CURRENT MARKET PRICE (e)	No. Of Days/Nights (If Applicable) (f)	Sub-Total (g)=[(c) (e) (f)]	5% Contingency for Price Escalation (h)=[(g) (5%)]	TOTAL COST (i) =(g)+(h)
1	COMPUTER CLEANER_Wipe Out	7	can	63.95		447.65		447.65
2	INK CARTRIDGE (For Existing units of Printers)_for HP 934XL BLACK	9	Cart	1,890.00		17,010.00		17,010.00
3	INK CARTRIDGE (For Existing units of Printers)_for HP 935XL CYAN	5	Cart	1,207.50		6,037.50		6,037.50
4	INK CARTRIDGE (For Existing units of Printers)_for HP935XL MAGENTA	5	Cart	1,207.50		6,037.50		6,037.50
5	INK CARTRIDGE (For Existing units of Printers)_for HP935XL YELLOW	5	Cart	1,207.50		6,037.50		6,037.50
6	RIBBON (For Existing units of Printers)_for Dot Matrix, 132 Columns, OKI ML5791	5	Spool	4,000.00		20,000.00		20,000.00
7	RIBBON (For Existing units of Printers)_for OKI ML1120, 80 column	6	Spool	4,000.00		24,000.00		24,000.00
8	THERMAL PAPER_for EPSON TM-182ii	300	roll	121.28		36,384.00		36,384.00
9	TONER CARTRIDGE (For Existing units of Printers)_for HP LASERJET PRO M102a (17A)	2	Cart	2,310.00		4,620.00		4,620.00
10	TONER CARTRIDGE (For Existing units of Printers)_for HP NFP 725DN HP14A, CF214A	4	Cart	13,492.50		53,970.00		53,970.00



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PhilHealth Regional Office IV-A
Luzon's Grand Central Terminal, Bldg. B, 3rd Floor, Lungsod City
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11	TONER CARTRIDGE (For Existing units of Printers)_for HP37A	40	Cart	11,025.00		441,000.00		441,000.00
12	TONER CARTRIDGE (For Existing units of Printers)_for HP79A	5	Cart	2,682.75		13,413.75		13,413.75
13	TONER CARTRIDGE (FOR NEW PRINTER MODELS)_Toner Cartridge, Colored	7	cart	11,550.00		80,850.00		80,850.00
TOTAL								709,807.90

Prepared by:

JOSEPH ADRIAN R. REJANO
AO III

Certified Funded in COB

ARON R. RIANO
Head, FMS

Recommended by:

BENJIE A. CUVINAR
OIC, MSD

Approved:

EDWIN M. ORINA, M.D.
RVP, PRO IVA





PhilHealth Regional Office IVA

2020-01-059

July 9, 2020

Date. 7/9/2000 3P





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PURCHASE REQUEST (PR) PhilHealth Regional Office IVA		
Department / Office :	PRO IV-A	PR No. : 2020-01-059
Division :	ASS	Date : July 9, 2020

Item No.	Unit	Item Description	Qty	Estimated Unit Cost	Estimated Total Cost
12	Cart	TONER CARTRIDGE (For Existing units of Printers) for HP79A	5	2,682.75	13,413.75
13	cart	TONER CARTRIDGE (FOR NEW PRINTER MODELS) Toner Cartridge, Colored	7	11,550.00	80,850.00
		NOTHING FOLLOWS	-	-	-
		C.O.B. / Trust: 2020 COB			
		Expense Code: 5020301002			
		Charge to: MSD-Admin			
		Budget Limit: 709,807.90			
		Signature: MA. PAMELA B. LEYNES			
				Grand Total	709,807.90

We certify that the items and corresponding amount listed above are based on the CY 2020 COB and within the approved 2020 app. All items requested under this PR SHALL NOT, hereinafter, be available for realignment, unless cancelled within the prescribed period.

PURPOSE:		REGULAR IT SUPPLIES (2nd Qtr)- SHOPPING	
	Prepared By:	Recommended By:	Approved By:
Signature:			
Printed Name:	JOSEPH ADRIAN R. REJANO	BENJIE A. CUVINAR	EDWIN M. ORIÑA, MD
Designation:	AO III	OIC, MSD	RVP, ORVP
Date:			

