

Supplier:

Address:

Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

PhilHealth Regional Office IVA
Lucena Grand Central Terminal, Brgy, Ilayang Dupay, Lucena City
Call Center (02) 841-7442 | Contact Number (042) 373-7554
www.philhealth.gov.ph | region4a@philhealth.gov.ph



PO No. 20-01-073 Date: October 1, 2020

PURCHASE ORDER

OFFICE/DEPARTMENT: MSD-Admin

NEW BETHRO TRADING AND CAR CARE CENTER

Diversion road, Broy, Gulang-Gulang, Lucena City

Tel.Fax No.:		042 710 71	22	Terms of Payment		
Suppli	er Registe	ered with:	DTI	Mode of Procurement	Shopping	
F	Please de	liver to this off	ice within 15 days from receipt hereof the following		\	
NO.	QTY	UNIT	VITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT	
			Procurement of Office Supplies			
1	3 ,	tank/cylinde	Freon R22, atleast 13.6kg	3,950.00	11,850.00	
			nothing follows			
				TOTAL AMOUNT	11,850.00	
			Less Taxes: 5% VAT	529.02	\	
	WO-W-		1% EWT	105.80	634.82	
			Purchase Request No: 2020-01-088 Dated: 9/24/2020	NET AMOUNT	11,215.18	

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
- 2. If the date of receipt of the Purchase Order / PQ by the dealer is not indicated, it shall be deemed received on the day it was acknowledge to have been received by a representative either through fax or email.
- 3. 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 alleast 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 one-time 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
- 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 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.

				DENJIE A. CUVINAR OIC, MSD	
Certified Budget Av	allable	Funds Available in the amount of	11,850.00	APPROVED:	
MA. PAMELA I Budget Officer/ With in the COB:	Designate 2020 COB	ARON R. RIANO Fiscal Controller IV		EDWIN M. DRIÑA, M.D.	
Expense Code: Budget: Remarks	5 02 03 010 01 11,850 00	1		RVP - ARO IVA	
Conforme:	Jones	Fakes F-akes Authorized		Received Copy of PO. /	
Signatur	e over Pinted Na Rep	ame and Position of Authorized resentative		Date	



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