

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
PHILHEALTH REGIONAL OFFICE-CORDILLERA ADMINISTRATIVE REGION

SNOBT Inc. Bldg., No. 19 Leonard Wood Road, Baguio City
Tel. No. (074) 444-9862 / 444-8361 / 446-0371 / 444-5345 (T/F) / Call Center (02) 441-7442

www.philhealth.gov.ph

PURCHASE ORDER

Supplier: **CURAMED PHARMACY**
Address: **GF UB Commerce Bldg., Ge. Luna Rd., BC**
Tel./Fax No.: **424-3648**
Supplier Registered with:

P.O. No.: **P-20- 037**
Date: **12/28/20**
Term/s of Payment: **on account**
Mode of Procurement: **PS/S**

Please deliver to this office within **10 days** from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	136	gal	ALCOHOL, per gallon, 68% - 72% Ethanol, Ethyl Alcohol) colorless, clear liquid, fully miscible in water.	418.00	56,848.00
2	8355	pc	Surgical Mask	1.59	13,284.45
TOTAL					70,132.45
			Less: 5% Final Tax	3,130.91	
			1% EWT	626.18	3,757.09
Net of Tax					66,375.36

Terms & Conditions:

- 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.
- If the date of receipt of the Purchase Order (P.O.) 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 e-mail.
- Delivery of the above item(s) shall be made within the prescribed schedule dates. Supplier are advised to inform GSU at least two (2) days before the delivery. Use of elevator shall only be from 9:00 to 11:30 a.m and 1:30 to 4:00 p.m during Mon to Fri. All item(s) shall be delivered and accepted by the GSU at 3rd floor, SNOBT Inc. Bldg., No. 19 Leonard Wood Road, Baguio City.
- Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- Defective, incompatible or non-compliance of good 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 Officer order No. 0018-2015 entitled (Reiteration of PhilHealth No Gift Policy (Revision 1) which is deemed incorporated in to this contract. No PhilHealth personnel shall solicit, demand, or accept; directly or indirectly, any gift from any person, group or 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 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.
- Retention Fee of 1% of gross amount (GPPB Resolution No. 30-2017 of 2016 Revised IRR of RA 9184)
- NON-DISCLOSURE AGREEMENT** - The parties and any or al of their staff or representatives who will be involved in this project shall be required to sign a mutual Non-Disclosure Agreement and maintain strict confidentiality on any information accessed from the PhilHealth database or provided by PhilHealth.

Very truly yours,

[Signature]
IMELDA CRISTETA D. VILLAMAR
Division Chief, MSD

Certified Budget Available: <i>[Signature]</i> LEILAND. TAN SIO III/ Budget Officer-Des. Within the COB: 2020 Expense Code: 5023080 Budget: 27,475 Remarks: 2020-12-00194 Conforms: <i>[Signature]</i> Signature over Printed Name and Position of Authorized Representative	Funds Available in the amount of: 70,132.45 <i>[Signature]</i> MIRASOL E. ADRIAS Fiscal Controller IV	APPROVED: <i>[Signature]</i> DOMINGA A. GADGAD, M.D. Acting Regional Vice President Date: 1/15/21
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