



PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: CSI WAREHOUSE CLUB INC.

PO No. 2021_085

Address: Lucao District, Dagupan City

Date: 12/1/2021

Tel.Fax No.: 522-9488

Terms of Payment: COD

Supplier Registered with: 005-333-806-000 V

Mode of Procurement: Negotiated Procurement-
Small Value Procurement

Please deliver to this office within 1 day - pick-up from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	24	sack	RICE, 10 kilos	536.00	12,864.00
2	20	bx	CLOUD 9 CANDY BITESIZE, 12packs/bx	731.00	14,620.00
3	20	bx	CANNED GOODS-SARDINES, 100pcs/bx	1,715.00	34,300.00
4	113	pck	SKYFLAKES, 10pcs/pack	49.45	5,587.85
5	40	pck	SHAMPOO	50.00	2,000.00
6	80	pc	BATHSOAP	16.65	1,332.00
7	4	bx	BATHSOAP, 162pcs/bx	2,636.00	10,544.00
8	4	bx	TOOTHPASTE, 144pcs/bx	912.00	3,648.00
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL	84,895.85
			PR No. 21-1020-0202		
			Less: VAT (5%/1.12)	3,789.99	
			EWT (1%/1.12)	758.00	4,547.99
			PURPOSE: Conduct of Outreach Program in Relation to the 26th PhilHealth Anniversary for CY 2021	TOTAL - NET	80,347.86

Terms & Conditions:

- In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent (1%) for every day of delay shall be imposed.
- For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
- The contracting parties undertake to comply with Office Order No. 0018-2015 entitled "Reiteration of PhilHealth No Gift Policy (Revision 1) which is deemed incorporate into this Contract. No PhilHealth personnel shall solicit, demand, or accept, directly or indirectly, any gift from any person, group, 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 in connection with any transaction which may affect the functions of thier office or influence the actions of directors or employees, or create the appearance of a conflict of interest.
- PhilHealth shall have the right to reject and return the items and cancel the corresponding PO if goods delivered are defective, incomplete or non-compliant as
- In case of returned/rejected items which cannot be replaced within seven (7) calendar days from notice, PhilHealth shall demand full refund of payment made "in
- Deliveries should be made within 8:00AM - 12:00NN and 1:00PM - 3:00PM on working days on or before the date stipulated in the PO.
- Partial delivery per item will not be accepted.

Very truly yours,

CYNTHIA S. SANTOS

Division Chief IV / MSD Chief

Certified Budget Available: _____ Funds Available in the amount of: <u>84,895.85</u>		APPROVED:	
JOSE A. MONES Fiscal Controller III	EDWARD Q. ESPIRITU AO IV / OIC-OFMS Chief	 RECEIVED BY: _____ Date: <u>12/02/21</u>	
With in the COB: <u>2021</u> Expense Code: <u>5029918001</u> Bdgct: <u>84,895.85</u> Remarks: <u>MOOE/HO SUPPORT</u> Conforme: _____ Signature over Printed Name and Position of Authorized Representative			
		Date	