JOB ORDER

(non - inventoriable items)

OFFICE/DEPARTMENT: PRO 1

Supplier: FINE PRECISION DIAGNOSTIC CLINIC	Work Order No.: 21_48
Address: AB Fernandez West Poblacion Oeste, Dagupan City	Date: 11/9/2021
Tel. Fax No.: 0975-395-2963 / 0929-513-0944	Term of Payment: Charge
Supplier Registered with: 305-931-995-001 NV	Mode of Procurement: Negotiated Procurement-Small Value Procurement

Please deliver to this office within 2 weeks from receipt hereof the following.
Note: Additional ____ working days to submit for approval of test / sample.

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
	15	employees	Drug Screening/Testing	200.00	3,000.00
			xxxxxxxxxxxxxx nothing follows xxxxxxxxxxxxxx	TOTAL	3,000.00
			Less: Tax		
			VAT (1%)		30.00
			PR No. 21-1026-0204 Requesting Unit: LHIO Eastern Pangasinan and PCARES	Total-Net of Tax	2,970.00

Terms & Conditions:

1. The agency shall impose penalty in an amount equivalent to 1/10 of one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
2. If the date of receipt of the Job Order (J.O.) 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 e-mail.
3. Delivery of the above item/s shall be made within the prescribed schedule dates. Suppliers are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall be from 9:00AM to 11:30 AM and 1:30pm to 3:00PM during Mon/Wed/Fri (MWF).

All item/s shall be delivered and accepted by the Procurement Section at 15th Floor, Room 1503 Citystate Ctr. Bldg. Pasig City.

4. Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
5. Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery.
6. In case the series of layout/design presented by the supplier does not satisfy the end-user, the Corporation has the right to cancel the Job Order (JO).
7. Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available:	Funds Available in the amount of: 3000	APPROVED
JOSE A. MONES Fiscal Controller III	EDWARD O. ESPIRITU AO IV / OIC-OPMS Chief	DENNIS B. ADRE Regional Vice President

With in the COB:	2021
Expense Code:	50 299 99 006
Budget:	3000
Remarks:	[illegible]

CONFORME:

JEMIMAH DE GUZMAN
Signature Over Printed Name of Supplier / Representative

Received copy of J.O. on 11/12/2021
Date

COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)
NOV 12 2021
RECEIVED BY: