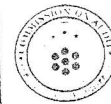


COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)



MAR 30 2021

RECEIVED BY: JB

POMM-P-006

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
1201 Commonwealth Boulevard, 12th Floor, Taguig City

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: HOTELINDA SUITES
Address: Rivero St., Brgy. VIII, Vigan City, Ilocos Sur
Tel./Fax No.: 077-674-0809
Supplier Registered with: 102-277-382-000 V

PO No. 2021_005 ✓

Date: 3/29/2021

Terms of Payment: Charge

Mode of Procurement: Negotiated Procurement

Small Value Procurement

Please deliver to this office within on March 30, 2021 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
21	pax	LUNCH		250.00	5,250.00
21	pax	SNACKS		100.00	2,100.00
		XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL		7,350.00
		Less: VAT (5%/1.12)			328.13
		PR No. 21 0326-0062			
		PURPOSE: <u>Commemoration of 60th Anniversary Celebration PRD</u>	TOTAL - NET		7,021.87
		<u>Hotelinda Suites, Vigan City, Ilocos Sur</u>			

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 incorporated into this Contract. No PhilHealth personnel shall solicit, demand, or accept, directly or indirectly, any gift from any person, group, association, or institution, 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 their 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 specification when quoted.
- 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 cash or in check" within (3) calendar days.
- Deliveries shall 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

Checked Budget Available <u>JOSE A. MONES</u> Fiscal Controller III	Funds Available as the result of <u>EDWARD Q. ESPIRITU</u> AO IV / OIC OFMS Chief	APPROVED DENNIS B. ADRE <u>ON OFFICIAL LEAVE</u> Regional Vice President, PRO1 <u>3-30-21</u> <u>JAN CAR M. ARZADON, MS</u> MO VII, MCMD Chief OIC, Office of the RVP
With PO No. <u>CY 2021</u> PO No. <u>879921801</u> Budget <u>7,350.00</u> Remarks <u>for SUPPORT</u>	Signature <u>JOSEPH FORMOSO</u> Date: <u>3/30/2021</u> Signature over Printed Name and Position of Authorized Representative	Date <u>MAR 30 2021</u>