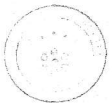


COMMISSION ON AUDIT
AUDIT TEAM R-104 (PHIC Group)



JUN 29 2021

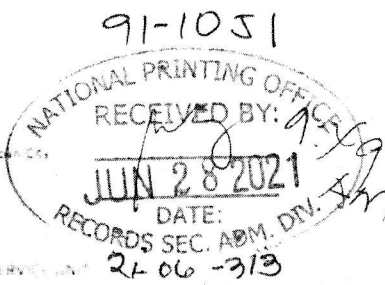
RECEIVED BY: JB

Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

1501 Commercial Bldg., Francisco Duque St., Tabuco District, Dagupan City

PURCHASE ORDER



PO/M P. 006

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION - GENERAL SERVICES UNIT

Supplier: **NATIONAL PRINTING OFFICE**
Address: **Edsa cor. NPO Rd., Diliman, Quezon City**
Tel./Fax No.: **(02) 925-2197**
Supplier Registered with: **000-769-754 NV**

PO No. **2021_035**
Date: **6/22/2021**

Terms of Payment: **COD**
Mode of Procurement: **Negotiated Procurement-Agency-to-Agency**

Please deliver to this office within **pick-up by client** from receipt hereof the following:

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	2	book	CASH BOOK For regular Disbursement Officer (Gen. Form No. 103)	420.00	840.00
***** Nothing Follows *****					
PR No. 21-0521-0123					
PURPOSE: for LMS use					
				TOTAL	840.00

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 identifying 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: **Restoration 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 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 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-compliance in 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, three (3) calendar days.
- Deliveries should be made within 8:00AM to 3:00PM on working day(s) on or before the date stipulated in the PO.

National Printing Office

RECEIVED BY: Am

Date: **6/21/21 @ 8:35am**

CYNTHIA SANTOS

Contract Budget Available: Funds Available in the amount of **840.00**

JOSE A. MONES
Fiscal Controller III

EDWARD Q. ESPIRITU
AD-IV / LMS Chief

Sales & Marketing Division
2021-06-0133

NATIONAL PRINTING OFFICE

RECEIVED

by: [Signature] Date: **6/28/21**
Production Planning & Control Division

APPROVED

[Signature]
MARILYN ARZADON, MD.
Medical Officer VII - PHICMD

DENNIS B. ADRI
Regional Vice President, PHIC

Date: _____

Conforme: **Sofia M. Batllaran**
Sales & Promotion Supervisor III
Signature over Printed Name and Position of Authorized Representative

Date: **06-29-21**

3:10 PM