



JUN 29 2021

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PQMM-P-006

Republic of the Philippines  
PHILIPPINE HEALTH INSURANCE CORPORATION  
1501 Commercial Bldg., Francisco Duque St., Tapue District Dagupan City

PURCHASE ORDER

OFFICE / DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: PAN APPLIANCE CORP  
Address: Bgry. Estacion, Paniqui, Tarlac  
Tel. Fax No.: 529-3608  
Supplier Registered with: 225-913-641-000 V

PO No. 2021\_037

Date: 6/23/2021

Terms of Payment: Charge

Mode of Procurement: Negotiated Procurement-  
Small Value Procurement

Please deliver to this office within 7 days from receipt hereof the following:

| NO.                                 | QTY  | UNIT | ITEM DESCRIPTION  | UNIT PRICE | TOTAL AMOUNT |
|-------------------------------------|------|------|---|------------|--------------|
| 1                                   | unit |      | WATER DISPENSER Hot and Cold cooling 3.4L, Heating 1.2L   | 6,265.00   | 6,265.00     |
| WARRANTY : 1 year parts and service |      |      | XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX | TOTAL      | 6,265.00     |
|                                     |      |      | Less: VAT (5%/1.12)                                       |            | 279.69       |
|                                     |      |      | PR No. 21-0521-0131                                       |            |              |
|                                     |      |      | PURPOSE: For PRO 1 Use                                    | TOTAL      | 5,985.31     |

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 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" three (3) calendar days.
- Deliveries should be made within 8:00AM to 3:00PM on working days on or before the date stipulated in the PO.

Very truly yours,

CYNTHIA S. SANTOS  
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available with amount of: 6,265.00  
JOSE A. MONES EDWARD Q. ESPIRITU  
Fiscal Controller III AO IV / OIC OFMS Chief

Within the COB: CY 2021  
Expense Code: 4020321002  
Budget: 6,265.00  
Remarks: LOCE / SEMI - EX

Conformed: R. HODONA / CARLITO

Date: June 29, 2021

Signature over Printed Name and Position of Authorized Representative

APPROVED:

DENNIS B. ADRE  
Regional Vice President, PRO1

Date