COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)
JUL 06 2021
POMM-P 006
RECEIVED BY: [signature]

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
LSU Commercial Bldg., Fraternidad Street, Tapuac District, Dagupan City

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION - GENERAL SERVICE UNIT

PO No. 2021_041
Date: 6/30/2021

Supplier: CSI WAREHOUSE CLUB INC.
Address: Lucao District, Dagupan City
Tel.Fax No.: 522-9488
Supplier Registered with: 005-333-806-000 V
Terms of Payment: COD
Mode of Procurement: Shopping

Please deliver to this office within 15-30 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	2	pcs	CLIPBOARD For legal size document	50.00	100.00
2	195	pcs	FOLDER Metal Ring Binder, long, 2 Hole Arc File	81.25	15,843.75
3	6	boxes	FOLDER PRESSBOARD, plain, for legal size papers/documents, 242mm x 369mm, color: cream, green, or maroon, etc. 100pcs/box	1,125.00	6,750.00
4	78	packs	PAPER VELLUM, A4	23.50	1,833.00
5	5	rolls	TAPE MASKING, Size 1 (24mm) 50M	33.75	168.75
			xxxxxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxxx	TOTAL	24,695.50
			PR No. 21-0618-0139		
			Less: VAT (5%/1.12)	1,102.48	
			EWT (1%/1.12)	220.50	1,322.98
			PURPOSE: For PRO Use	TOTAL - NET	23,372.52

Terms & Conditions:

1. 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.
2. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
3. 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.
4. 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.
5. 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.
6. 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.
7. Partial delivery per item will not be accepted.

Very truly yours,

[signature] 7/1/21
CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: 24,695-

[signature]
JOSE A. MONES
Fiscal Controller III

[signature]
EDWARD C. ESPIRITU
AO IV / OIC OFMS Chief

Within the COB: CY 2021
Expense Code: 50203010 01
Amount: 24,695.50
Remarks: MOOE / VARIOUS COST CENTER

APPROVED:

[signature]
JUL 01 2021
MARICAR M. ARZADON, M.D.
Medical Officer VII - HCDMD

DENNIS B. ADRE
Regional Vice President, PRO1

Date

Conforme:

[signature] MARICEL ECHAVEZ Date: 7/5/21
Signature over Printed Name and Position of Authorized Representative