



Republic of the Philippines  
PHILIPPINE HEALTH INSURANCE CORPORATION  
LNU, Commercial Bldg., Francisco Duterte St., Tuguegarao District Dagupan City

POMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: HOTELINDA SUITES  
Address: Rivero St., Vigan City, Ilocos Sur  
Tel/Fax No.: 0917-568-2768  
Supplier Registered with: 102-277-382-000 V

PO No. 2021\_062  
Date: 9/7/2021

Terms of Payment: Charge  
Mode of Procurement: Negotiated Procurement-  
Small Value Procurement

Please deliver to this office within on September 9, 2021 from receipt hereof the following:

QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
11	pax	AM SNACKS	125.00	1,375.00
		XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL	1,375.00
		Less: VAT (5%/1.12)		61.38
		PR No. 21-0806-0169		
		PURPOSE: Conduct of Third Quarter Nationwide Simultaneous Earthquake Drill (NSED) CY 2021 in LHIO Ilocos Sur	TOTAL	1,313.62

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 - 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*  
CYNTHIA S. SANTOS  
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: 1,375.00

JSE A. MONES  
SCAT Controller III  
EDWARD Q. ESPIRITU  
AO IV / OIC-Office of the FMS Chief

Item Code: 01 2021  
Project Code: XXXXXXXXXXXX  
Unit: 1,375.00  
Remarks: 100% / AT SUPPLY

Signature: [Signature]  
Date: 9/8/2021  
Signature over Printed Name and Position of Authorized Representative

APPROVED:

*[Signature]*  
MARICAR M. ARZADON, M.D.  
Medical Officer VII - HCDMD  
DENNIS B. ADRE  
Regional Vice President, PRO1

SEP 07 2021

Date