



Republic of the Philippines  
**PHILIPPINE HEALTH INSURANCE CORPORATION**  
 LNU, Commercial Bldg., Francisco Duque St., Tapuac District Dagupan City

**PURCHASE ORDER**

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: VINZ IHAW-IHAW SA PANDAYAN  
 Address: Pandayan, Pob. Alaminos, Pangasinan  
 Tel.Fax No.: 9082531301  
 Supplier Registered with: 927-796-869 NV

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



NOV 15 2021

RECEIVED BY:

POMM-P-006

PO No. 2021\_076

Date: 11/3/2021

Terms of Payment: Charge

Mode of Procurement: Negotiated Procurement-  
Small Value Procurement

Please deliver to this office within 10 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	100	pcs	Softdrinks	15.00	1,500.00
2	150	pcs	Crackers	7.00	1,050.00
3	150	pcs	Coffee	10.00	1,500.00
4	150	pcs	Juice	10.00	1,500.00
5	30	packs	Candies	45.00	1,350.00
6	10	packs	Coffee / Juice Cup	60.00	600.00
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXXXXX	<b>TOTAL</b>	<b>7,500.00</b>
			Less: VAT (1%)		75.00
			PR No. 21-0930-0191		
			PURPOSE: Customers' Delight for LHIO Western Pangasinan	<b>TOTAL</b>	<b>7,425.00</b>

**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**  
 Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: 7,500.00

**JOSE A. MONES**  
 Fiscal Controller III

**EDWARD Q. ESPIRITU**  
 AO IV / OIC-OFMS Chief

With in the COE: 07/2021

Expense Code: 5020001000

Budget: 7,425.00

Remarks: 100% / LMD NR

Conforme:

Signature over Printed Name and Position of Authorized Representative

Date: 11-10-21

APPROVED:

**DENNIS B. ADRE**  
 Regional Vice President, PRO1

Date