

## Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

PhilHealth Regional Office IVA
Lucena Grand Central Terminal, Brgy. Ilayang Dupay, Lucena City
Call Center (02) 8441-7442 | Contact Number (042) 373-7554
www.philhealth.gov.ph | region4a@philhealth.gov.ph



## **PURCHASE ORDER**

OFFICE/DEPARTMENT: MSD-Admin

Supplier:	MG	CB MARKETING	PO No.	2021-04-080
Address:	Merchan S	St.,	Date:	October 12, 2021
	Lucena Ci	ty		
Tel.Fax No.:	0919 097 8	3584 / 0905 212 6950	Terms of Payment:	ON ACCOUNT
Supplier Registered with:		Department of Trade and Industry	Mode of Procurement:	NP-SV

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

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	1 ,	unit	CANOPY TENT (3M X 6M) Retractable Heavy Duty	6,000.00	6,000.00
					6,000.0
			Less Taxes: 1% NVAT	60.00	\
			1% EWT	60.00	120.0
				TOTAL AMOUNT	5,880.0
			Purchase Request No: 2021-01-098		
			Date: 31-Aug-21		

Terms & Conditions:

- The agency shall impose equivalent to 1/10 of 1 percent of the total value of the undelivered order for each day of delay
  as liquidated damages.
- If the date of receipt of the Purchase Order / PO by the dealer is not indicated, it shall be deemed received on the day it was acknowledge
  to have been received by a representative either through fax or email.
- 3. Delivery of the above item(s) shal be made within the delivery period from Mondays to Fridays 8am to 5pm. Supplier are advised to inform Procurement Section atleast two (2) days before the delivery. All item(s) shall be delivered and accepted by the Property and Supply Unit at Philhealth Regional Office IV-A, Lucena Grand Central Terminal, Brgy. Ilayang Dupay, Lucena City.
- 4. Delivery Receipt and Sales Invoice shall be required to one-time complete delivery of the goods.
- Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery. With provision for a back-up unit in case of repair.
- 6. The contracting parties undertake to comply with Office Order No. 0018-2015 entitled Reiteration 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 or 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 which in connection with any transaction which may affect the functions of their office or influence the actions of directorsor employees, or create the appearance of a conflict of interest.

Very truly yours, BENJIE A. CUVINAR Chief, MSD APPROVED: Certified Budget Available Funds Available in the amount of: 6,000.00 MA. PAMELA B. LEYNES ARON R. RIANO Fiscal Examiner A Fiscal Controller IV With in the COB: 2021 COB GRANAL 5020321007 Expense Code ARVP, PRO IVA Budget: 6.000.00 Remarks: Conforme: Received Copy of PO: GILSON Baen Signature over Pinted Name and Position of Authorized Date Representative

PhilHealthofficial teamphilhealth actioncenter philhealth.gov.ph