

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: Address: Tel.Fax No.: Supplier Register		METRO RETAIL STORES GROUP INC ML Tagarao St., Brgy III, Lucena City 09224453479			PO No.	COD
					Date: Terms of Payment: Mode of Procurement:	
NO.	QTY	UNIT	ITEM DESCRIPTION		UNIT PRICE	TOTAL AMOUNT
1	48	gallons	Medical Supplies, Disinfectant Cleaner (ZONROX BLEACH ORIGINAL)		131.85	6,328.80
						6,328.80
			Less Taxes: 5%	VAT	282.54	
			1%	ЕWТ	56.51	339.05
				'n	OTAL AMOUNT	5,989.75
			Purchase Request No: 2021-01-120 Date: 24-Sep-21			
6.	delivery. With The contractin which is deeme any person, gro such gift is give	provision for a back g parties undertake ed incorporated into oup or association, on en in the course of o	impliant of goods as to specification when quoted shall be rejected and returned at the time of teup unit in case of repair. to comply with Office Order No. 0018-2015 entitled Reiteration of Philhealth No Gift Policy (Rothis Contract. No Philhealth personnel shall solicit, demand, or accept, directly or indirectly, an or juridical entity, whether from the public or private sector, at anytime, on or off the work premoficial duties or which in connection with any transaction which may affect the functions of the remployees, or create the appearance of a conflict of interest.	y gift from ises where	Very truly yours,	CUVINAR
	Budget Availa	ble: B. LEYNES	Funds Available in the amount of: 6,328.80)	Chief, APPROVED:	MSD
Fiscal	Examiner A		Fiscal Controller IV		AALAN M. ARVP, P	GRANAL PRO IVA
Remarks			Julus Imal 1		Received Copy of PO:	

Signature over Pinted Name and Position of Authorized

Representative

Date