

Republic of the Philippines  
PHILIPPINE HEALTH INSURANCE CORPORATION

POMM-P-007

**JOB ORDER**  
(Non - Inventoriable Items)

OFFICE/DEPARTMENT: PRO 1

Supplier: MANAWARI BEAUTY AND WELLNESS HUB  
Address: San Miguel, Calasiao, Pangasinan  
Tel. Fax No: 09685649279  
Supplier Registered with: 604-987-581-0000 NV

Work Order No.: 22-13  
Date: 4/29/2022  
Term of Payment: COD  
Mode of Procurement: Negotiated Procurement-  
Small Value Procurement

Please deliver to this office within April 30, 2022 from receipt hereof the following:

| NO. | QTY | UNIT | SERVICE DETAILS                                                                                                                                                   | UNIT PRICE            | TOTAL AMOUNT |
|-----|-----|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------|
| 1   | 18  | pax  | Body massage and foot spa                                                                                                                                         | 600.00                | 10,800.00    |
|     |     |      | Total                                                                                                                                                             |                       | 10,800.00    |
|     |     |      | XXXXXXXXXXXXXXXXXXXX nothing follows XXXXXXXXXXXXXXXXXXXX                                                                                                         |                       |              |
|     |     |      | Less: TAX                                                                                                                                                         |                       |              |
|     |     |      | VAT (1%)                                                                                                                                                          |                       | 108.00       |
|     |     |      | EWT (2%)                                                                                                                                                          |                       | 216.00       |
|     |     |      | PR No. 22-0429-0118 (5029918001)<br>For Philhealth's 27th Anniversary Activity<br>Celebration "Philhealth Employees' Day" of LHIO<br>Central Pangasinan personnel | Total - Net of<br>Tax | 10,476.00    |

Terms & Conditions:

- The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
- If the date of receipt of the Job Order (J.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledged to have been received by a representative either through fax or e-mail.
- Delivery of the above item/s shall be made within the prescribed schedule dates. Suppliers are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall be from 9:00AM to 11:30 AM and 1:30pm to 3:00PM during Mon/Wed/Fri (MWF).
- All item/s shall be delivered and accepted by the Procurement Section at 15th floor, Room 1503 Citystate Ctr. Bldg. Pasig City.
- Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- Defective, incompatible or non-compliant of goods as to specification will be returned and returned at the time of delivery.
- In case the series of layout/design presented by the supplier does not comply the Procurement Section shall not be bound to accept the Job Order (JO).
- Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.

COMMISSION  
AUDIT TEAM  
MAY 02 2022  
Very truly yours  
CYNTHIA S. SANTOS  
Division Chief IV / MSD Chief

|                                                                                                                                   |                                                                                                                                    |                                                                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Certified Budget Available:<br><i>[Signature]</i><br>JOSE A. MONES<br>Fiscal Controller III                                       | Funds Available in the amount of: <u>10,800</u><br>RECEIVED BY: <i>[Signature]</i><br>EDWARD Q. ESPIRITU<br>AO IV / OIC-OFMS Chief | APPROVED:<br>DENNIS B. ADRE<br>Regional Vice President<br>By: <i>[Signature]</i><br>MARICARM. ARZADON, M.D.<br>Medical Officer VII - HCLMD |
| With in the COB: <u>04/2022</u><br>Expense Code: <u>5029918001</u><br>Budget: <u>10,800</u><br>Remarks: <u>MODE / HOS SUPPORT</u> | Received copy of J.O. on: <u>4/29/2022</u><br>Date:                                                                                | CONFIRME: <i>[Signature]</i><br>JANELLA T. MONTUÑA<br>Signature over Printed Name<br>of Supplier / Representative                          |

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