

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

JOB ORDER
(Non - Inventoriable Items)
OFFICE/DEPARTMENT: PRO 1

POMM-P-007

Supplier: ACULAB DRUGTESTING CENTER
Address: Alexander St. Poblacion, Urdaneta City, Pangasinan
Tel. Fax No.: 09324094617
Supplier Registered with: 305-234-739-000 NV

Work Order No.: 22_62

Date: 12/7/2022

Term of Payment: Charge

Mode of Procurement: Negotiated Procurement-
Small Value Procurement

Please deliver to this office within/on Dec. 12, 2022 from receipt hereof the following:

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
	15	pax	Mandatory Drug Screening/Testing XXXXXXXXXXXXXXXXXXXX nothing follows XXXXXXXXXXXXXXXXXXXX Less: TAX VAT (1%) PR No. 22-1128-0317 (5029999006) Requesting Unit: LHIO Eastern Pangasinan	220.00 TOTAL Total - Net of Tax	 3,300.00 3,300.00 3,267.00

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 when quoted shall be rejected and returned at the time of delivery.
- In case the series of layout/design presented by the supplier does not satisfy the end-user, the Corporation has the right to cancel 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.

Very truly yours,

[Signature]
CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Careful Budget Available: _____ Funds Available in the amount of: 3,300

JOSE A. MONES
Fiscal Controller III

EDWARD Q. ESPIRITU
AO IV / OIC-OFMS Chief

APPROVED:

DENNIS B. ADRE
Regional Vice President (RVP)
By the Authority of the RVP:

Year in the C.O.B.: 2022
Funding Code: 5029999006 / STOS 8
Budget: 3300
Remarks: CHCDMD

JOSEPHINE Q. QUITON
RVP

DEC 07 2022

CONFORME:

[Signature]
Signature over Printed Name
of Supplier / Representative

Issued to: _____

12-18-2022

Date

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



DEC 15 2022

RECEIVED BY: [Signature]