

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
AKIA Bldg., Old De Venecia Highway, Lucao, Dagupan City

PURCHASE ORDER

Supplier: NORTHERN LUZON DRUG CORPORATION
Address: Liang Bldg., Perez Blvd., Dagupan City
Tel.Fax No.: 523-2310 / 529-2494
Supplier Registered with: 004-021-156-003 V

OFFICE/DEPARTMENT ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT
PO No. 2022_052
Date: 7/1/2022
Terms of Payment: COD
Mode of Procurement: Shopping

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

POMM-P-006

JUL 05 2022

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

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	15	tab.	Ace inhibitor, 50 mg., RM losartan	11.75	176.25
2	75	tab.	Antacids, Kremil-S	7.75	581.25
3	50	cap.	Antacids, Omeprazole, 20 mg., RM Omeprazole	27.00	1,350.00
4	10	tab.	Antitussive, Terbutaline Sulfate, Bricanyl tablet	17.25	172.50
5	210	tab.	Anti-Diabetes, Metformin, 500mg./tablet, RM metformin	3.50	735.00
6	60	cap.	Antidiarrheals, Loperamide, 2mg., diatabs	7.50	450.00
7	80	tab.	Antihistamine, Loratadine, 10mg., Claritin	24.25	1,940.00
8	40	tab.	Antihypertensive, Amlodipine, 10mg., RM amlodipine	9.00	360.00
9	500	tab.	Antipyretics Paracetamol, 500mg., Biogesic	3.75	1,875.00
10	30	tab.	Cough and Cold Preparations, Butamirate Citrate, 50mg., Sinecod	20.00	600.00
11	20	cap.	Cough and Cold Preparations, cap., 600 mg., Ascof	7.50	150.00
12	70	cap.	Nsaids, Ibuprofen, 500mg., Advil	8.50	595.00
13	69	caplet	Nsaids, Mefenamic Acid, 500mg., Dolsten	3.75	258.75
14	20	tab.	Oral Antispasmodic Hyoscine-N Butylbromide, 10mg., Buscopan	25.75	515.00
15	50	dragee/tab	Other Drugs Acting on the respiratory system, Sinupret	11.75	705.00
16	100	cap.	Pain reliever celecoxib 400mg./capsule, Celcoxx	49.50	4,950.00
17	749	box.	Vitamin C, 500mg. 100 cap/box, immunpro	800.00	599,200.00
				TOTAL	614,613.75
			Less: VAT (5%/1.12)	27,438.11	
			EWT (1%/1.12)	5,487.62	32,925.73
			PR No. 22-0617-0158 [50203070]		
			PURPOSE: Medical Supplies for PRO 1 use, APP Amendment Batch 4	TOTAL - NET	581,688.02

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.

Very truly yours,

Cynthia S. Santos
CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: <i>57 MEC AUTOMATION UTM</i>		Funds Available in the amount of: <i>614,613.75</i>	APPROVED: By the Authority of the RVP: <i>JOSEPHINE Q. QUITON</i> JOSEPHINE Q. QUITON Division Chief - POD DENNIS B. ADRE Regional Vice President, PRO1
JOSE A. MONES Fiscal Controller	<i>EDWARD Q. ESPIRITU</i>	<i>7/1/2022</i>	<i>JUL 01 2022</i>
With in the COB:	<i>EDWARD Q. ESPIRITU</i>	<i>50203070</i>	
Expense Code:	<i>50203070</i>	<i>614613.75</i>	
Budget:	<i>614613.75</i>	<i>VARIOUS LOCCT CTR</i>	
Remarks:			
Conforme:	<i>HERIBERTO F. TANGAN</i>		
Signature over Printed Name and Position of Authorized Representative			