

REDUDIC OF THE PHILIPPINE I EACH HAS URANCE EDRPORATION AND Blog, Clid De Venec la Highway, Lucao, Dagagan Cay

POMM-P- 005

PURCHASE ORDER

DETRE ME BASTILL MT	ALMANNI STRATING CECTIO	N. GENERAL SERVICE UNIT
TILLITE LITTLE LULY AND LAT	MUNICIPALITY COLUMN	A THE WORKS BUILDING OF ALL

Supplier: CSI WAREHOUSE CLUB INC.		PO No. 2022_054		
Address:	Lucao District, Dagupan City	Date: 7/4/2022		
Tel.Fax No.:	9773676949	Terms of Payment: COD		
Supplier Reg	istered with: 005-333-806-000 V	Mode of Procurement: Shopping		

Please deliver to this office within 15 days from receipt hereof the following:

vo.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1:	8	unit	link pad for Self Inking Stamp 5-830	164.75	1,318.00
-	14	unit	Ink pad for Self Inking Stamp S-830 D	134,75	1,886.50
•••				TOTAL	3,204.50
			Less: VAT (5%/1.12)	143.06	143.06
			PR No. 22-0425-0112 (5020301001)		
		and the first term are	PURPOSE: Regular Supplies for PRO 1 Use, APP amendment Batch 3	TOTAL - NET	3,061.44

Terms & Conditions:

- 1. 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.
- 7. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted
- 3 The contracting parties undertake to comply with Office Order No. 0018-2015 entitled "Reiteration of Philleaith No Gift Policy (Revision 1) which is deemed
- 4 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:
- 5 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

Very truly yours,

6 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.

APPROVED: inte in the amount of: EDWARD Q. ESPIRITU OSE A. MONES Fiscal Controller AQ IV / OIC-DFMS Chief CY2022 5020301001 With in the COB IS B. ADRE Expense Code. Regional Vice President, PRO1 Seget: kemarks. GSU/NAMOUS CONT Conforme: Date Signature over Printed Name and Position of Authorized Representative

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

JUL 12 2022

RECEIVED BY: