

Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

AKIA Bidg., Old De Venecia Highway, Lucao, Dagupan City

POMM-P- 006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier:	LET'S EAT LAH FOOD HOUSE	PO No.	2022 111
Address:	Ambonao, Calasiao, Pangasinan	Date:	11/11/2022
Tel.Fax No.:	075-653-4661	Terms of Payment:	Charge
Supplier Registered with: 100-088-599 NV		Mode of Procurement:	Negotiated Procurement
			Small Value Procurement

Please deliver to this office within/on December 5, 2022 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	156	pax	Meals	200.00	31,200.00
			xxxxxx Nothing Follows xxxxx	TOTAL	31,200.00
			Less: VAT (1%)		312.00
			EWT (1%)		312.00
			PR No. 22-1104-0283 (5029918009)		
			PURPOSE: For the conduct of 18-day Campaign to End VAWC	TOTAL - NET	30,576.00

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.
- 2. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
- 3. 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 thier office or influence the actions of directors or employees, or create the appearance of a conflict of interest.
- 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 specification when quoted.
- 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 cash" or "in check" three (3) calendar days.
- 6 Deliveries should be made within 8:00AM to 3:00PM on working days on or before the date stipulated in the PO.

/ the Authority of the Certified Budget Available 27 Division Chief IV / MSD Chief Funds Available in the APPROVED: MARIMEL C. BRAVO AO IV / OIC-OFMS Chief JOSE ASMA NEShtroller II Fiscal Controller III CY2022 With in the COB: 502 9918 009 /57010 10 Expense Code 31200 DENNIS B. ADRE Bdget: Regional Vice President, PRO1 GAO Remarks: Conforme: Date: 20 Signature over Printed Name and Position of Authorized Representative

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

DEC 05 2022

RECEIVED BY:

Very truly yours,