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

POMM-P-F06

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: WEST LOCH PARK HOTEL
Address: Vacunero, Sto. Domingo, Ilocos Sur
Tel.Fax No.: 0917-876-5492
Supplier Registered with: 285-427-665-000 V

PO No. 2022_118
Date: 11/24/2022
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement-Small Value Procurement

Please deliver to this office within November - December 2022 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION		UNIT PRICE	TOTAL AMOUNT
1	50	pax	Snacks	Inclusive of Venue	150.00	7,500.00
2	50	pax	Lunch		300.00	15,000.00
			xxxxxx Nothing Follows xxxxx		TOTAL	22,500.00
			Less: VAT (5%/1.12)			1,004.46
			EWT (1%/1.12)			200.89
			PR No. 22-0909-0235 (5029901002)			
			PURPOSE: For the conduct of Konsulta Orientation, eKonsulta System and UHC Updates		TOTAL - NET	21,294.64

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 juridical 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.
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.

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: 22,500.-

JOSE A. MONES
Fiscal Controller III

EDWARD Q. ESPIRITU
AO IV / OIC-OFMS Chief

With in the COB: CY 2022
Expense Code: 5029901002/STOB 12
Budget: 22,500.00
Remarks: HO SUPPORT

Conforme:

Micaela Cassandra ... Date: 11/29/22
Signature over Printed Name and Position of Authorized Representative

APPROVED: By the Authority of the RVP:

NOV 25 2022

JOSEPHINE Q. QUITON
Division Chief - FOD
DENNIS B. ADRE
Regional Vice President PRO1

Date

COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)
DEC 07 2022
RECEIVED BY: