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

FORM P. 006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT

Supplier: LENOX HOTEL
Address: Rizal Street, Brgy. I & II, Dagupan City
Tel.Fax No.: 9177019563
Supplier Registered with: 113-888-383-001 V

PO No. 2022_177
Date: 11/29/2022
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement Lease of Real Property & Venue

Please deliver to this office within/on December 6-7 & 9, 2022 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	45	pax	Day 1, AM & PM Snacks, Lunch	685.00	30,825.00
2	71	pax	Day 2, AM & PM Snacks, Lunch	685.00	48,635.00
3	102	pax	Day 3, AM & PM Snacks, Lunch	685.00	69,870.00
			Inclusive of Venue		
			xxxxxx Nothing Follows xxxxx	TOTAL	149,330.00
			Less: VAT (5%/1.12)		6,666.52
			EWT (1%/1.12)		1,333.30
			PR No. 22-1107-0286 (5020001002)		
			PURPOSE: for the conduct of "Orientation on Latest PhilHealth Circulars with the Health Care Institutions in Regiona 1".	TOTAL - NET	141,330.18

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.

By the Authority of the Budget Officer
AYRIN AQUINO
Fiscal Controller II

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds available in the amount of: 149,330

JOSE A. MONES
Fiscal Controller III

EDWARD Q. ESPIRITU
AO IV / OIC-OFMS Chief

With in the COB: CY2022
Expense Code: 0029901002 / LTOB 5
Budget: 149 330
Remarks: REACHOUT / HOSUPPORT

APPROVED: By the Authority of the RVP:

DEC 02 2022

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

Conforme:

NICOLE C. MUÑOZ - Marketing Officer Date: 12/02/2022
Signature over Printed Name and Position of Authorized Representative

Date

COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)
DEC 05 2022
RECEIVED BY: