Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTOR, GENERAL SERVICES UNIT

Supplier: LEN(X HOTEL
Address: Rizal St., Dagupan City, Pangasinan
Tel/Fax No.: 09177029167
Supplier Registered with: 113 888 985 001 V

PO No. 2022 178
Date: 11/17/2022
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement - Lease of Real Property & Venue

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

QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
50	pax	Meal (Dinner)	[illegible]	25,000.00
		four (4) main course menu with free coffee & 4 hours used of		
		function hall with amenities		
		Inclusive of Venue		
		***** Nothing Follows *****	TOTAL	25,000.00
		Less: VAT (5%/1.12)		1,114.07
		EWT (1%/1.12)		223.21
		PR No. 22-1124-0818 (5020001001)		
		PURPOSE: For the conduct of Balamat Mabuhay Program for Jorylin M. Felipe	TOTAL - NET	23,660.72

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:
AYKIN AQUINO
Budget Officer III

Very truly yours,
CERTIFIED CORRECT
Division Chief IV / MSD Chief

Certified: Budget Available/ Funds Available in the amount of: 25,000.-
E A. MONES
Chief Accountant III
EDWARD Q. ESPIRITU
AO IV / OIC-OFMS Chief

Charge to the COA: CY2022
Expense Code: 020601001
Object: 25000
Particular: MOOPPORT

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

APPROVED:
By the Authority of the RVP:
DEC 02 2022
JOSEPHINE Q. QUITON
Division Chief - POD
DENNIS B. ADAE
Regional Vice President, PRO1
Date

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