

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
REGIONAL HEALTH INSURANCE OFFICE III
 PhilHealth Bldg., Lazatin Blvd., San Agustin,
 City of San Fernando, Pampanga
 General Services Unit (GSU) Healthline (045) 963-0299

PURCHASE ORDER

Supplier: **SOFILL WATER REFILLING STATION** P.O. No.: **22-012**
 Address: **49 VIOLETA ST. PILAR VILLAGE, CITY OF SAN FERNANDO, PAMPANGA** Date: **March 15, 2022**
 Tel/ Fax No.: **09178337691** Term of Payment: **15 DAYS**
 Supplier Registered with: **PHILHEALTH** Mode of Procurement: **Small Value Procurement**

Please deliver to this Office within **15 working days** from receipt hereof :

NO.	QTY.	UNIT	ITEM / DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	3890	5 gallon round container	PURIFIED DRINKING WATER (see attached technical specifications)	31.50	122,535.00
			*****Nothing Follows*****		
			AOC-G-2022-012		
			23-2022-03-004	TOTAL AMT.	PHP 122,535.00

Conditions:

1. The Agency shall impose penalty in an amount equivalent to 1/10 of 1 percent of the value of undelivered order for each day of the delay as liquidated damages.
2. Render your bills in triplicate copies including the original.
3. The conformed Technical Specifications (attached hereto) by the winning bidder shall form part of this Purchase Order.
4. Guided by the "No Gift Policy" of PhilHealth.

Very truly yours,

Evelyn E. Ocampo
EVELYN E. OCAMPO
 PRO3 SBAC - Head

Certified Budget Available:	Funds available in the amount of PHP 122,535.00	APPROVED
<i>Lilibeth A. Polintan</i> LILIBETH A. POLINTAN Budget officer	<i>Leonidas A. Lumba</i> LEONIDAS A. LUMBA FC IV / Fund Management Section	<i>Edgardo F. Faustino</i> EDGARDO F. FAUSTINO Acting Vice President PRO III
Within the COB: <u>2022</u> Expense Code: <u>RAE-5020301001</u> Budget: <u>122,535.00</u> Remarks: _____		

CONFORME:
Benedicto A. Polintan III
BENEDICTO A. POLINTAN III
 SIGNATURE OVER PRINTED NAME
 OF SUPPLIER/ REPRESENTATIVE

03-17-22
 DATE RECEIVED COPY OF P.O.