

Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

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

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: Address:

MARIGOLD STORE

Supplier Registered with: 157-686-860-000 V

A.B. Fernandez Avenue, Dagupan City, Pangasinan

PO No. 2023_018

Date: 3/28/2023

Tel.Fax No.: 0939-4782325

Terms of Payment: Charge Mode of Procurement: Negotiated Procurement-

Small Value Procurement

POMM-P- 006

Please deliver to this office within 3 days from receipt hereof the following:

| NO. | QTY | UNIT | ITEM DESCRIPTION | UNIT PRICE | TOTAL AMOUNT |
|-----|-----|------|--|------------|--------------|
| 1 | 1 | lot | Balloons Assorted Color & Size | 2,000.00 | |
| 2 | 1 | lot | Spray Paint & Paint Brush | | 2 000.00 |
| 3 | 1 | lot | Sashes Assorted | 3,700.00 | 3 700.00 |
| | | 101 | xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx | 1,600.00 | 1 600.00 |
| | | | | Total | 7,300.00 |
| | | | | | 325.89 |
| | | | PR No. 23-0327-0139 (5029918001) | | |
| | | | PURPOSE: For PRO 1 Employees Day | TOTAL | 6,5 /4,11 |

- 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
- If the date of receipt of the Purchase Order (P.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledge to have been received by a representative either through fax or email
- For imported items, IMPORTATION DOCUMENTS apecifically showing the condition, serial numbers of the equipment purchased, and tax receipts 5 ould be submitted by the supplier.
- 4 Delivery Receipt and/or Sales Invoice shall be require. I for one-time complete delivery of the goods.
- 5 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 the roffice or influence the actions of directors or employees, or create the appearance of a conflict of interest.
- 6 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.
- In case of returned/rejected items which cannot be eplaced within seven (7) calendar days from notice, P illHealth shall demand full refund of payment hade "in cash" or "in check" three (3) calendar days. Lette Authority of the Chief, MSD

| ROSELA L. FERRER AYKIN P. AQUINO 3 26 2023 ISCAL CLERK III A.D. 2023 FC II Certified Budget Available: Funds Available in the arcount of: | CYNTHIA S. SANTOS Division Chief IV / MSD Chief |
|---|---|
| JOSE A. MONES Fiscal Controller III AO IV / OIC-OFMS Chief With in the COB: Expense Code: Bdget: P = 1000.00 Remarks: H SUPPOLT | RARICAR AL ARZADON, M.D. MO VII / Chief, HCDMD, DIC-OPUP DENNIS B. ADRE Regional Vice President, PRO1 |
| Conforme: MARIO D NOVALES Date: 3-29-23 Signature over Printed Name and Position of Author and Representative | Date |

COMMISSION ON AUDIT AUDIT TEAM R1-04 (PHIC Group) RECEIVED 2