

Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

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

POMM-P- 006

PURCHASE ORDER

OFFICE IDEA ADTA ATA		
OFFICE/DEPARTMENT:	ADMINISTRATIVE SECTION	GENERAL SERVICE LIMIT

		2 22 11 311) SEIVELINE SEIVICE OWN		
Supplier:	KAÑON GENERAL MERCHANDISE	PO No.	2023 118	
Address:	130 Malabago, Mangaldan, Pangasinan		9/14/2023	
Tel.Fax No.: 09178942929		Terms of Payment:		
Supplier Registered with: 176-634-293-000 V		Mode of Procurement:		

Please deliver to this office within 7-15 days upon receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	2	pcs	Data File Box made of chipboard with cover	375.00	750.00
2	12	pcs	Marker Whiteboard; Black tip: felt, bullet type	32.50	390.00
3	6	pcs	Marker Whiteboard; Blue tip: felt, bullet type	32.50	195.00
4	5	pcs	Marker Whiteboard; Red tip: felt, bullet type	32.50	162.50
			xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	TOTAL	1,497.50
			Less: VAT (5%/1.12)		66.85
			PR No. 23-0809-0235 (5020301001)		
			PURPOSE: For PRO 1 use - From APP Amendment Batch 6	TOTAL	1,430.65

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 - 12:00NN and 1:00PM - 3:00PM on working days on or before the date stipulated in the PO.

Division Chief IV / MSD Chief Certified Budget Available Funds Available in the amount of: 1,497. 50 APPROVED: EDWARD Q. ESPIRITU Mane JOSÉ A. MONES Fiscal Controller III FC IV / FMS Chief With in the COB: 502020100 \$1,407.50 Budget: President, PRO1 VARION COST CONTERNS Conforme: SEP 15 2013 Signature over Frinted Name and Position of Authorized Representativ Date

AUDIT TEAM R1.04 (PHIC Group)

INUV 00 2023

RECEIVED BY:
PO Emails 10-31-23

COMMISSION ON AUDIT

Very truly yours,