

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

POMM-P- 006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier:

ECHIMESCO OFFICE SOLUTIONS MARKETING

PO No. 2023 121

Address:

Perez Blvd., Dagupan City, Pangasinan

Date: 9/14/2023

Tel.Fax No.: 0933-8104633

Terms of Payment: Charge

Mode of Procurement: Negotiated Procurement-

Supplier Registered with: 735-854-314-000 V

Small Value Procurement

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	2	units	Paper Shredder, high volume document shredder, strip & cut that can staples, credit cards, CDs auto reverse, with motor overheating protection, shred capacity: 1-26 sheets A4, shred size: 3.0mm to 4.0mm, Shred/cutting speed: 6-100mm/sec. operation: electronics characteristics: 220V/1 phase/60Hz	32,995.00	65,990.00
			(Note: 1 year warranty)		
			xxxxxx Nothing Follows xxxxx	TOTAL	65,990.00
			Less: VAT (5%/1.12)		2,945.98
			EWT (1%/1.12)		589.20
			PR No. 23-0519-0178 (10605020)		
			PURPOSE: For ORVP and LHIO Ilocos Norte	TOTAL - NET	62,454.82

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.
- 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.

Division Cl ertified Budget Available: ands Available in the amount of: 65.990.00 APPROVED: EDWARD Q. ESPIRITY OSE A. MONES Fiscal Controller III FC IV / FMS Chief With in the COB 106051 Expense Code: DENNIS \$ 65,990 . VI Budget: Regional Vice President, PRO1 VAPLOUR COST CONTENT Remarks Conforme: SEP 15 2023 Signature over Printed Name and Position of Authorized Representative Date

> COMMISSION ON AUDIT AUDIT TEAM R1-04 (PHIC Group) RECEIVED BY:

Very truly yours