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

POMM-P- 006

PURCHASE ORDER

OFFICE / DEPARTMENT: ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT

Supplier: BIENBENIQ OPC
Address: Santiago Norte, San Fernando City, La Union
Tel.Fax No.: 0928-4558032/ 0966-1880579/ 0966-1880576
Supplier Registered with: 627-299-893-00000 V

PO No. 2023-140
Date: 10/11/2023
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement-Lease of Privately Owned Venue

Please deliver to this office within/on October 24, 2023 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	36	pax	Meals (AM Snack, Lunch and PM Snack)	699.00	25,164.00
			Inclusive of Venue		
			xxxxxxxxxxxx xxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxx	TOTAL	25,164.00
			Less: VAT (5%/1.12)		1,123.39
			EWT (1%/1.12)		224.68
			PR No. 23-0925-0279 (5029901002)		
			PURPOSE: for the conduct of Electronic Member Registration and Records Amendment (EMRRA) Forum of UHC La Union	TOTAL	23,815.93

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 function 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 - 5:00PM** on working days on or before the date stipulated in the PO.

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

THE AUTHORITY OF THE PRESIDENT DELEGATED
TM P. AQUINO

Certified Budget Available: Funds Available in the amount of: 23,164.00

JOSE A. MONES
Fiscal Controller III

EDWARD Q. ESPIRITU
FC IV / FMS Chief

By the Authority of the FMS Chief
10/17/23
JOSE A. MONES
Fiscal Controller III

With in the CDB: 2023
Expense Code: 5029901002 (EMRA)
Budget: P 23,164.00
Remarks: PAU

Conforme:
Maycelle Grady Reyes 10-17-2023
Signature over Printed Name and Position of Authorized Representative

APPROVED:

DENNIS B. ADRE
Regional Vice President, PRO1
By: JOSEPHINE O. QUINTON
Division Chief - MSD
OIC - RVP
Date: OCT 13 2023

COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)
OCT 19 2023
RECEIVED BY: