



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

POMM-P- 006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

	OFFICE/DEFARTMENT. ADMINIST	MINE SECTION, GENERAL SERVICE ONIT	
Supplier:	RH ENTERPRISES	PO No.	2023-151
Address:	Vigan City, Ilocos Sur	. Date:	10/17/2023
Tel.Fax No.:	0917-5850243/ 0917-8053689	Terms of Payment:	Charge
Supplier Registered with: 102-277-261 V		Mode of Procurement:	Negotiated Procurement-
			Small Value Procurement

Please deliver to this office within/on 7 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	1	рс	3/4" PPR Pipe	300.00	300.00
	12	pcs	1/2" PPR Pipe	220.00	2,640.00
	6	pcs	1/2 PVC Pipe (Orange)	45.00	270.00
			xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	TOTAL	3,210.00
			Less: VAT (5%/1.12)		143.30
			PR No. 23-1017-0303		
-			PURPOSE: For LHIO Ilocos Sur New Office Space	TOTAL	3,066.70

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.

By the Authority of the	10117197	Very truly yours, CYNTHIALS, SANTOS
Fiscal Cont	roller II	Division Chief IV / MSD Chief
Certified Budget Available:	Funds Available in the amount of: 3, 2/0 - 0)	APPROVED:
JOSE A. MONES	EDWARD Q. ESPIRITU POPP	mer
Fiscal Controller III	FC IV / FMS Chief	= 1
With in the COB:	AYKIM P. AQUINO 13 623	
Expense Code:	FCII	DENNIS B. ADRE
Budget:		Regional Vice President, PRO1
Remarks:		<i></i>
Conforme:	Inthus Lual 10-18-29	OCT 17 2023
Signature over Printed N	Name and Position of Authorized Representative	Date

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

OCT 2.3 2023

RECEIVED BY: