



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

POMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: CSI WAREHOUSE CLUB, INC.

Address: Lucao District, Dagupan City, Pangasinan

Tel. Fax No.: _____

Supplier Registered with: 005-333-806-000 V

PO No. 2023_168

Date: 11/17/2023

Terms of Payment: COD

Mode of Procurement: Negotiated Procurement-
Small Value Procurement

Please deliver to this office within 15-30 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	8	gal	Medical Supplies Disinfectant Cleaner; Whitening, deodorizing, elimination of disease-causing germs, removal of tough stains and dirt	131.25	1,050.00
2	97	roll	Medical Supplies Tissue Roll 3-ply	15.00	1,455.00
3	23	pack	Medical Supplies Tissue Roll 2-ply, 12 rolls in a pack	96.75	2,225.25
			XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	TOTAL	4,730.25
			Less: VAT (5%/1.12)		211.17
			PR Nos. 23-0809-0234 (50203080)		
			PURPOSE: Medical Supplies for PRO 1 use/ From APP Amendment Batch 6	TOTAL - NET	4,519.08

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
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
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
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
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.
7. Partial delivery per item will not be accepted.

By the authority of the MSD Chief

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: \$ 4,730.25

JOSE A. MONES
Fiscal Controller III

EDWARD O. ESPIRITU
FC IV / FMS Chief

With in the COB: 04 NOV

Expense Code: 60200000

Budget: 4,730.25

Remarks: VARIOUS COST CTR

Conforme:

ETMA 

Nov. 22, 2023

Signature over Printed Name and Position of Authorized Representative

APPROVED:

DENNIS B. ADRE
Regional Vice President, PRO1

By: 
JOSEPH O. QUITON
Division Chief - F&D
Date: 07-07-2023

NOV 20 2023

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



NOV 23 2023

RECEIVED BY: 