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: ALAD BAR & RESORT
Address: Naguilian, Caoayan, Ilocos Sur
Tel.Fax No.: 0917-5432548
Supplier Registered with: 922-445-782-000 V

PO No. 2023_187
Date: 12/6/2023
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement-Small Value Procurement

Please deliver to this office within/on December 12, 2023 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	80	pax	AM Snacks	200.00	16,000.00
	80	pax	Lunch	350.00	28,000.00
	80	pax	PM Snacks	200.00	16,000.00
			xxxxxx Nothing Follows xxxxx	TOTAL	60,000.00
			Less: VAT (5%/1.12)		2,678.57
			EWT (1%/1.12)		535.71
			PR No. 23-1128-0343 (5029901002)		
			PURPOSE: MOA signing and inauguration of the new LHIO Ilocos Sur Office	TOTAL - NET	56,785.72

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 to 3:00PM** on working days on or before the date stipulated in the PO.

By the authority of the MSD C

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available — Funds Available in the amount of 60,000

JOSE A. MONES
Fiscal Controller III

EDWARD O. ESPIRITU
IT IV / FMS Chief

APPROVED: DEC 07 2023

By:

MARICAR M. ARZADON, MD
MO VII, HCDMD Chief
OIC, Office of the RVP

With in the COB: 2023
Expense Code: 5020990002 | 5020604
Budget: P 60,000.00
Remarks: PAU

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

DENNIS B. ADRE
Vice President, PROS

Conforme:

GERALYN R. QUESADO
Signature over Printed Name and Position of Authorized Representative

Date: 12-11-2023