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

POMM-P- 006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION , GENERAL SERVICE UNIT

Supplier: GOLDMASTER HOLDING CORPORATION
Address: A.B. Fernandez, Avenue, Dagupan City, Pangasinan
Tel.Fax No.: 523-0478
Supplier Registered with: 423-286-719-000 V

PO No. 2023_194
Date: 12/19/2023
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement-Small Value Procurement

Please deliver to this office within 30-45 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	4,500	pcs	Corrugated Box Specs: Body: HSC, OD, 350# CB Flute, O color print, Glue joint 387 x 293 x 265mm Cover: SPL of 175# B-Flutem, O color print knock, 400 x 293 x 64mm	43.25	194,625.00
			xxxxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxx	TOTAL	194,625.00
			Less: VAT (5%/1.12)		8,688.62
			EWT (1%/1.12)		1,737.72
			PR Nos. 23-1121-0330 (5020301001)	TOTAL - NET	184,198.66
			PURPOSE: For PRO 1 use/ From APP Amendment Batch 10		

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
3. The contracting parties undertake to comply with Office Order No. 0015-2015 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.

Very truly yours,

CYNTHIA L. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: 194,625

JOSE A. MORES
Fiscal Controller III

EDWARD O. ESPIRITU
FC IV / FMS Chief

With in the COB: 8DEC
Expense Code: 5020301001
Budget: P 194,625.00
Remarks: WITHIN CERT COVERAGE

Conforme: Rea Rodriguez Date: 12/21/23
Signature over Printed Name and Position of Authorized Representative
Sales Rep.

APPROVED:

DENNIS B. ADRE
Regional Vice President, PRO1

DEC 19 2023
Date

COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)
DEC 22 2023
RECEIVED BY: