

PURCHASE ORDER

OFFICE/DEPARTMENT: Calamba LHO

Supplier: CMC TOWER CAFE
Address: CMC Tower Brgy. Real Calamba City
Tel/Fax No.: 09321819923
Supplier Registered with: DTI No. 1466814

PO No. 2023-04-043
Date: 25-May-23

Terms of Payment: on account
Mode of Procurement: NPSV


Please deliver to this office 15 days (from receipt of PO) hereof the following:

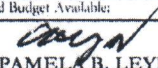
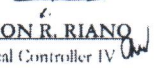
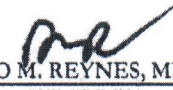
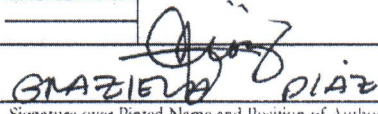
NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
			BATCH 1		
1	3,328	pax	Packed crinkles (packed of three, medium-sized, around 2.5" inches in diameter, .5" inch in height) and juice in tetra pack (200 ml)	75.00	249,600.00
			Others: Batch 1: 3,328 pax- to be delivered within 15 days upon receipt of PO		
					249,600.00
			Less Taxes: 5% VAT	11,142.86	
			1% FWT	2,228.57	13,371.43
			TOTAL AMOUNT		236,228.57
			Purchase Request No: 2023-01-070		
			Date: 5-May-23		

Terms & Conditions:

- PhilHealth shall impose equivalent to 1/10 of 1 percent of the total value of the undelivered order for each day of delay as liquidated damages.
- If the date of receipt of the Purchase Order / PO by the supplier is not indicated, it shall be deemed received on the day it was acknowledge to have been received by a representative either through fax or email.
- Delivery of the above item(s) shall be made within the delivery period from Mondays to Fridays 8am to 5pm. Supplier are advised to inform Procurement Section atleast two (2) days before the delivery. All item(s) shall be delivered and accepted by the Property and Supply Unit at Phil Health Regional Office IV-A, Lucena Grand Central Terminal, Brgy. Ilayang Dupay, Lucena City.
- Delivery Receipt and Sales Invoice shall be required to one-time complete delivery of the goods.
- Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery. With provision for a back-up unit in case of repair.
- The contracting parties undertake to comply with Office Order No. 0018-2015 entitled Reiteration of Phil Health No Gift Policy (Revision 1) which is deemed incorporated into this Contract. No PhilHealth personnel shall solicit, demand, or accept, directly or indirectly, any gift from any person, group or association, or juridical 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 which in connection with any transaction which may affect the functions of their office or influence the actions of directors or employees, or create the appearance of a conflict of interest.

Very truly yours,


BENJIE A. CUVINAR
Division Chief IV, MSD

Certified Budget Available:	Funds Available in the amount of:	249,600.00	APPROVED:
 MA. PAMELA B. LEYNES Fiscal Controller II	 ARON R. RIANO Fiscal Controller IV		 DANILO M. REYNES, MD, MPA RVP, PRO IVA
With in the COB: 2023-COB	Expense Code: 5 02 99 010 02	Budget: 499,200.00	Remarks:
Conforme:			Received Copy of PO:
 Signature over Printed Name and Position of Authorized Representative			5/31/23 Date