

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: CSI WAREHOUSE CLUB, INC.

PO No. 2024_335

Address: Lucao District, Dagupan City, Pangasinan

Date: 12/23/2024

Tel.Fax No.: 0999-4766842

Terms of Payment: COD

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

Mode of Procurement: Negotiated Procurement-
Small Value Procurement

Please deliver to this office within 7-15 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	29	pack	Diaper (Adult)	380.85	11,044.65
	9	pack	Diaper (Infant)	181.10	1,629.90
	917	pcs	Bath Soap	15.70	14,396.90
	374	pack	Shampoo (Sachet)	63.25	23,655.50
	774	pcs	Toothpaste (Sachet)	8.50	6,579.00
	640	pcs	Toothbrush	15.90	10,176.00
	155	pcs	Sanitary Pads/Napkin	50.10	7,765.50
	372	btl	Alcohol	45.85	17,056.20
	823	pcs	Milk (Adult)	17.10	14,073.30
	398	packs	Biscuits	59.50	23,681.00
	108	p.ctr	Cotton Buds	58.00	6,264.00
	1,964	pcs	Deodorant (Sachet)	6.75	13,257.00
			XXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX		
			TOTAL		149,578.95
			VAT (5%/1.12)		6,677.63
			EWT (1%/1.12)		1,335.53
			PR No. 24-1217-0514 (5029918001)		
			PURPOSE: For the conduct of PRO 1 Community Outreach Program	TOTAL - NET	141,565.79

Terms & Conditions:

- 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.
- For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
- 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.
- 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.
- 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.
- 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 BUDGET OFFICER.

JOSE A. MONES
Fiscal Controller III
12/26/2024

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of:	APPROVED:
JOSE A. MONES Fiscal Controller III	EDWARD Q. ESPIRITU FC IV / FMS Chief
With in the COB: 2024	DENNIS B. ADRE Regional Vice President, PRO1
Expense Code: 5029918001	
Bdget: 149,578.95	
Remarks: HOS report / rtdb 12	
Conforme: [Signature]	DEC 26 2024
Signature over Printed Name and Position of Authorized Representative	COMMISSION ON AUDIT AUDIT TEAM R1-24 (PHIC Group)



JAN 02 2025

RECEIVED BY:

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