



Republic of the Philippines  
PHILIPPINE HEALTH INSURANCE CORPORATION

POMM-P-007

JOB ORDER

(Non - Inventoriable Items)  
OFFICE/DEPARTMENT: PRO 1

Supplier: ELVIS DE LA RAGA QUITALIG  
Address: Bauang, La Union  
Tel. Fax No.: 0927-0286267  
Supplier Registered with: 449-651-721-000

Work Order No.: 24\_57  
Date: 11/11/2024  
Term of Payment: COD  
Mode of Procurement: Agency to Agency

Please deliver to this office on November 20, 2024 from receipt hereof the following:

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
1	1	pax	Honorarium for the Subject Matter Expert (SME)		10,862.00
			XXXXXXXXXXXXXXXXXXXX nothing follows XXXXXXXXXXXXXXXXXXXX PR No. 24-1015-0444 (5020201001)	TOTAL	10,862.00
			Requesting Unit: PRO 1 Purpose: Conduct of Training on Incident Command System (ICS)	Total - Net of Tax	

Terms & Conditions:

- The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated.
- If the date of receipt of the Job Order (J.O.) by the dealer is not indicated, it shall be deemed received on the day it was acknowledged to have been received by a representative either through fax or e-mail.
- Delivery of the above item/s shall be made within the prescribed schedule dates. Suppliers are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall be from 9:00AM to 11:30 AM and 1:30pm to 3:00PM during Mon/Wed/Fri (MWF).
- All item/s shall be delivered and accepted by the Procurement Section at 15th Floor, Room 1503 Citystate Ctr. Bldg. Pasig City.
- Delivery Receipt and Sales Invoice shall be required for 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.
- In case the series of layout/design presented by the supplier does not satisfy the end-user, the Corporation has the right to cancel the Job Order (JO).
- Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.

Very truly yours,

CYNTHIA S. SANTOS  
Division Chief IV / MSD Chief

BY THE AUTHORITY OF THE BUDGET OFFICER

AYKIN P. AQUINO  
FCD

Certified Budget Available:	Funds Available in the amount of: <u>10,862.00</u>	APPROVED:
JOSE A. MONES Fiscal Controller III	EDWARD Q. ESPIRITU FC IV / FMS Chief	DENNIS B. ADRE Regional Vice President
With in the COB: <u>2024</u>	By the Authority of the FMS Chief:	NOV 12 2024
Expense Code: <u>5020201001</u>	JOSE A. MONES Fiscal Controller III	MANICAR L. ARZADON, M.D. MO VII / Chief, HCDMD
Budget: <u>10862</u>	11-11-24	
Remarks: <u>HOSuppt A 1stab 7</u>		
Received copy of J.O. on	11-19-2024	CONFIRMED:
	Date	Signature over Printed Name of Supplier / Representative

