

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

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: CSI WAREHOUSE CLUB, INC.
Address: Lucao District, Dagupan City, Pangasinan
Tel.Fax No.: 9307421044
Supplier Registered with: 005-333-806-000 V

PO No. 2024_042

Date: 3/19/2024

Terms of Payment: COD

Mode of Procurement: Shopping

Please deliver to this office upon completion of the required quantity from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	26	roll	Adhesive Tape Area1, 1", Double sided w/o foam	25.00	650.00
2	1000	pcs.	Ball point pen, blue, fine point	5.25	5,250.00
3	50	roll	Masking Tape, 1", 24mm	36.00	1,800.00
4	25	roll	Masking Tape, 2", 48mm	71.75	1,793.75
5	75	roll	Packaging Tape, 2", 48mm	25.25	1,893.75
	75	roll	Transparent Tape, 2", 48mm	25.25	1,893.75
			xxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxxxxx		
			Less:	TOTAL	13,281.25
			VAT (5%/1.12)		592.91
			EWI (1%/1.12)		118.58
			PR No. 24-0216-0077 (5020301001)		
			PURPOSE: For PRO 1 use, 1st quarter CY 2024	TOTAL - NET	12,569.76

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:

AYKIN P. AQUINO
3/21/2024
FC II

Very truly yours,

CYNTHIA B. SANTOS
Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: 13,281.25

JOSE A. MONES
Fiscal Controller III

EDWARD Q. ESPIRITU
FC IV / FMS Chief

With in the COB: 2024
Expense Code: 5020301001
Bdget: P 13,281.25
Remarks: VARIOUS COST CENTERS

Conforme:

Signature over Printed Name and Position of Authorized Representative

ANGELA O. PUNATAP Date: 4/15/24

APPROVED:

DENNIS B. ADRE
Regional Vice President, PRO1

MARICAR M. ARZADON, M.D.
MOVI/CHIEF, SCAND
CIC-ORVP

Date

COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)



APR 16 2024

RECEIVED BY: