

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

POMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: **SARITA RESIDENCES AND LEISURE MANAGEMENT CORPORATION**  
Address: **Iaoag City, Ilocos Norte**  
Tel.Fax No.: **0917-7700520**  
Supplier Registered with: **010-386-012-000 V**

PO No. **2024\_065**

Date: **4/15/2024**

Terms of Payment: **Charge**

Mode of Procurement: **Negotiated Procurement-**

**Lease of Privately-Owned**

**Venue**

Please deliver to this office within/on April 24, 2024 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	49	pax	AM, PM Snacks & Lunch	550.00	26,950.00
			XXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXX		
			Less:		
			VAT (5%/1.12)		1,203.13
			EWT (1%/1.12)		240.63
			PR No. 24-0314-0133 (5029901002)		
			PURPOSE: Conduct of Konsulta Assisted Batch Registration and Employers/PEERS Forum for National Government Agencies in Ilocos Norte		
			TOTAL - NET		25,506.24

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 connect or 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

Very truly yours

**CYNTHIA S. SANTOS**

Division Chief IV / MSD Chief

Certified Budget Available: Funds Available in the amount of: **26,950**

**JOSUA MONES**  
Fiscal Controller III

**EDWARD Q. ESPIRITU**  
FC IV / FMS Chief

With in the COB:

Expense Code:

Budget:

Remarks:

Conformer:

Signature over Printed Name and Position of Authorized Representative

APPROVED:

**DENNIS B. ADRE**

Regional Vice President, PRO1

**APR 17 2024**

Date

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



**APR 23 2024**

RECEIVED BY:

**aa**