

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
Axx Bldg. Old NCR Veterans Highway, Lucena, Dagupan City

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION GENERAL SERVICE UNIT

Supplier: **AZIACARE MEDICAL TRADING & SERVICES**
Address: **Arellano Street, Dagupan City, Pangasinan**
Tel/Fax No.: **523-2099**
Supplier Registered with: **184-870-372-000 V**

PO No. **2024_076**

Date: **5/6/2024**

Terms of Payment: **Charge**

Mode of Procurement: **Negotiated Procurement-
Small Value Procurement**

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

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	1	unit	Stethoscope, 28", Baxtel	800.00	800.00
2	1	unit	Sphygmomanometer, Aneroid Manual (Gauge Type) with long arm cuff, Baxtel	1,000.00	1,000.00
3	1	unit	Finger Tip Pulse Oximeter, SPO2, pulse rate, SPO2 measurement range: 70%-90%, high accuracy, black, with AAA battery xxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxx	800.00	800.00
Less:				TOTAL	2,600.00
VAT (5%/1.12)					116.07
PR No. 24-0401-0163 (5020321004)					
PURPOSE: Semi-expandable medical equipment				TOTAL - NET	2,483.93

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 incorporated 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 their 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 / MSO/Chief

Checked Budget Available	Funds Available in the amount of: 2,600.00	APPROVED:
JOSE A. MONES Fiscal Controller III	EDWARD Q. ESPIRITU FC IV / FMS Chief	By: MH MARLENE D. SOLIBA, MD MS IV - ABAS HEAD DIC - ORVP DENNIS B. ADRE Regional Vice President, PRD1
Date: 5/6/24	Appr. Ref. Code: 5020321004/STOB10	
Appr. Ref. Code: P 2,600.00		
Appr. Ref. Code: Appr. 16/04		
Confirmer: JOMAR C. DOMANTAY / ADMIN	Date: 05/09/24	
Signature over Printed Name and Position of Authorized Representative		Date

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



MAY 21 2024

RECEIVED BY: **OS**