

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

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: JANPAC REALTY AND DEVELOPMENT  
Address: San Fernando City, La Union  
Tel. Fax No.: 0999-7107412  
Supplier Registered with: 609-043-486-001 V

PO No. 2024\_086  
Date: 5/8/2024  
Terms of Payment: Charge  
Mode of Procurement: Negotiated Procurement-  
Lease of Privately-Owned  
Venue

Please deliver to this office within/on May 20, 2024 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	23	pax	AM & PM Snacks, Lunch	898.00	20,654.00
			xxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxxx		
			Less:		
			VAT (5%/1.12)		922.05
			EWT (1%/1.12)		184.41
			PR No. 24-0202-0036 (5029901002)		
			PURPOSE: Meeting with the Chief Of Hospitals and Medical Directors of Region 1		
			TOTAL - NET		19,547.54

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.

THE AUTHORITY OF THE  
ROSELAL FERRER

Very truly yours,

CYNTHIA S. SANTOS  
Division Chief IV / MSD Chief

Funds Available: Funds Available in the amount of:

JOSE A. MONES  
Fiscal Controller III

EDWARD Q. ESPIRITU  
FC IV / FMS Chief

BY THE AUTHORITY OF THE FMS Chief  
AYKIMP. AQUINO  
FC II

APPROVED:

By: MARLENE D. SOLIBA, MD  
MS IV - ABAS HEAD  
OIC-ORVP  
DENNIS B. ADRE  
Regional Vice President, PRO1

MAY 09 2024

With in the COB:

Expense Code:

Budget:

Remarks:

Conformer:

Signature over Printed Name and Position of Authorized Representative

Date: 05/10/24

Date

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



MAY 20 2024

RECEIVED BY: