

Republic of the Philippines  
PHILIPPINE HEALTH INSURANCE CORPORATION  
Asia Bldg. ORT De Veneracion Highway, Laoag, Dagupan City

POMM-P-006

**PURCHASE ORDER**

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION / GENERAL SERVICE UNIT

Supplier:	YUMMIENT FOOD HOUSE	PO No.	2024_132
Address:	San Juan, La Union	Date:	6/7/2024
Tel/Fax No.:	0905-2357568 / 0919-0010544	Terms of Payment:	Charge
Supplier Registered with:	726-045-846-000 NV	Mode of Procurement:	Negotiated Procurement- Small Value Procurement

Please deliver to this office on June 13, 2024 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	250	pax	AM Snacks & Lunch xxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxx	330.00	82,500.00
			Less: NVAT (3%) EWT (1%)	TOTAL	82,500.00 2,475.00 825.00
			PR No. 24-0522-0255 (S029901002)		
			PURPOSE: Konsulta Service Delivery Caravan/Primary Care Social Mobilization Campaign at Naguilian La Union For UHIO La Union	TOTAL - NET	79,200.00

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 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.

By the authority of the MSD Chief:

*SALLY S. GOMEZ*  
SALLY S. GOMEZ  
HRMO III/Acting ASS Chief

Very truly yours,

*CYNTHIA S. SANTOS*  
CYNTHIA S. SANTOS  
Division Chief IV / MSD Chief

Approved Budget Available	Funds Available in the amount of <u>82,500</u>	APPROVED:
JOSE A. MONES Fiscal Controller III	EDWARD Q. ESPiritu FC IV / FMS Chief	DENNIS B. ADRE Regional Vice President, PRO1
With in the CDB: <u>024</u>	Expense Code: <u>SC0001001 / 070612</u>	By: <u>MARILYN D. SOLIBA, MD</u> JUN 07 2024
Budget: <u>P82,500.00</u>	Remarks: <u>ATO UNIT PK</u>	MEP: <u>JUN 07 2024</u> Date: <u>JUN 07 2024</u>
Conforme: <u>JERRY G. PASION</u>	Date: <u>JUNE 10, 2024</u>	Signature over Printed Name and Position of Authorized Representative

