

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

PDMM-P-006

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_141

Date: 6/11/2024

Terms of Payment: Charge

Mode of Procurement: Negotiated Procurement-
Lease of Privately-Owned
Venue

Please deliver to this office on June 25, 2024, from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	45	pax	AM Snacks & Lunch XXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX	400.00	18,000.00
			Less:		
			VAT (5%/1.12)		803.57
			EWI (1%/1.12)		160.71
			PR No. 24-0226-0092 (5029901002)		
			PURPOSE: Conduct of Orientation on Konsulta Registration to Konsulta Package Providers in Region I For IHIO La Union		
			TOTAL - NET		17,035.72

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.

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

Confirmed Budget Available: Funds Available in the amount of 10,000	APPROVED:
JOSE A. MONES Fiscal Controller III	EDWARD Q. ESPINOSA PC IV / FMS Chief
With in the EOB: 2024	
Expense Code: 32990002 / 4000 1	
Budget: P 18,000.00	
Remarks: NO SUPPORT	
Conforme: <i>[Signature]</i>	DENNIS B. ADRE Regional Vice President, PRO1
Signature over Printed Name and Position of Authorized Representative	Date: 06/18/24
	Date:

