Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
[illegible]

PGMM-P-006

PURCHASE ORDER

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: RICARDO'S DESSERT SHOP
Address: Agbayani Road, Poblacion, Laoac, Pangasinan
Tel.Fax No.: 9766115955
Supplier Registered with: 284-442-593-000 NV

PO No. 2024_207
Date: 8/29/2024
Terms of Payment: Charge
Mode of Procurement: Negotiated Procurement
Small Value Procurement

Please deliver to this office on September 6, 2024 from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	221	pax	AM Snacks	200.00	44,200.00
2	13	pax	AM Snacks & Lunch	350.00	4,550.00
			xxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxx		
			Less:	TOTAL	48,750.00
			VAT (3%)		1,462.50
			EWT (1%)		487.50
			PR No. 24-0822-0365 (5029901002)		
			PURPOSE: Conduct of Alaga Ka Activity to Barangay Health Workers (BHWs) of LGU Binalonan	TOTAL - NET	46,800.00

Terms & Conditions:

1. 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.**
2. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be submitted by the supplier.
3. 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.
4. 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.
5. 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**.
6. 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: 48,750.00	APPROVED:
JOSE ... MONES, Fiscal Controller III — EDWARD Q. ESPIRITU, FC IV / FMS Chief	DENNIS B. ADRE, Regional Vice President, PRO1
With in the COB: 2024 Expense Code: 5029901002 / [illegible] Budget: ₱ 48,750.00 Remarks: HO SUPPORT	SEP 02 2024
Conforme: Ricardo Rhynele Balderas Signature over Printed Name and Position of Authorized Representative sept 5,2024	Date

COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)
SEP 12 2024
RECEIVED BY: ____