

Republic of the Philippi
Province of Davao del Norte
Government Center, Mankilam, Tagum City
PURCHASE ORDER

7/2-23

Supplier : <u>MMJS PHARMACY & MEDICAL SUPPLIES</u>	P.O. No. : <u>2020051720</u>
PhilGEPS Registration No. : <u>2008 49128</u>	Date : <u>May 14, 2002</u>
Address : <u>BLK. 5 LOT 8, DINAVILLE SUBD., MAA, DAVAO CITY</u>	Mode of Procurement : <u>Shopping</u>
Tel / Fax #: <u>(082) 286-3398</u>	P.R. No. : <u>20032710</u>
Registration Certificate : <u>DTI</u>	
Req. Off.: <u>PEEDO - DN HOSPITAL - CARMEN ZONE</u>	

Gentlemen: Please furnish this office the following articles subject to terms and conditions contained herein:

Place of Delivery <u>PGSO Warehouse</u>	Delivery Term: <u>10Calendar Day/s</u>
Date of Delivery: <u>07-06-2020</u>	Payment Term : <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
1	100 BOX	PARACETAMOL 500MG TAB 100'S	72.00	7,200.00
2	100 BOT	PARACETAMOL SYRUP 60ML	24.00	2,400.00
3	100 BOT	PARACETAMOL DROPS	24.00	2,400.00
7	60 BOX	CETIRIZINE TAB	79.00	4,740.00

The award is based on Abstract No. 0520201659
dated May 04, 2020 under Quotation No. C20202112
opened on April 30, 2020

EMERGENCY PURCHASE FOR PREVENTION AND PROTECTION OF COVID 19 OF DDNH-CZ USE	16,740.00
GRAND TOTAL :P	16,740.00

Grand Total Amount in Words : **SIXTEEN THOUSAND SEVEN HUNDRED FORTY and 0/100**

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme:

Very truly yours,

[Signature]
Marta #101 V. J. J. J.

(Signature over printed name)

EDWIN I. JUBAHIB
Governor

JUN 03 2020

(Date)

By the Authority of the Governor:
[Signature]
GALE GUADALUPE G. MORTILERO, MSLRG, MHRM
Assistant Provincial Administrator (Administration)

NOTE : This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.