




PURCHASE ORDER

Supplier : SAVER'S DRUGSTORE Address : Door 1 Trebajo Building, Mabini St., Tagum City PhilGEPS Registration No. : 325715 Tel./Fax No. : 06276081272 Registration Certificate : DTI	P.O. Number: 2023030837  020230308372AE437B78 Date : Mar 24, 2023 P.R. No. : 2023010420 Procurement mode: Shopping B (Regular Purchase)
Req. Office : Provincial Disaster Risk Reduction Management	

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

Date of Delivery : <u>4-24-23</u> Payment Term : ON ACCOUNT	Delivery Term: 10 Calendar Days
Place of Delivery : PGSO Warehouse	


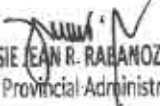
I.N.	Quantity/Unit	Item	Unit Cost	Amount
1	5.00 box	PARACETAMOL, 500mg, box of 100 Tablet Analgesic, Antipyretic Branded PHILPARA	200.00	1,000.00
2	5.00 BOX	PHENYLEPHRINE HCl PARACETAMOL 10mg/500mg box of 100 non-drowsy Tablet BRANDED NEOZEP	1,000.00	5,000.00
3	5.00 box	IBUPROPEN + PARACETAMOL, 200mg/ 325mg box of 100 Non-steroidal, Anti-Inflammatory Drug Capsule Branded ALAXAN	1,000.00	5,000.00
4	5.00 box	PHENYLPROPANOLAMINE HYDROCHLORIDE CLORPHENAMINE MELAEETE PARACETAMOL 25mg/2mg/352mg Forte box of 100 Tablet	500.00	2,500.00

FOR USE OF PDRRMD- DRUGS AND MEDS FOR RESPONDERS 1ST QUARTER

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 :


 _____ (Signature over printed name)	Very truly yours, By the Authority of the Governor:  EDWIN I. JUBAHIB Governor
<u>4-14-23</u> (Date)	ENGR. JOSIE JEAN R. RABANOZ, CE, MPA, EnP Provincial Administrator

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.

ALEJANDRO R. OMILA JR.



PURCHASE ORDER

Supplier : SAVER'S DRUGSTORE	P.O. Number: 2023030837
Address : Door 1 Trebajo Building, Mabini St., Tagum City	 O20230308372AE437B78
PhilGEPS Registration No. : 325715 Tel./Fax No. : 06276081272 Registration Certificate : DTI	Date : Mar 24, 2023 P.R. No. : 2023010420 Procurement mode: Shopping B (Regular Purchase)
Req. Office : Provincial Disaster Risk Reduction Management	

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I.N.	Quantity/Unit	Item	Unit Cost	Amount
		branded SYMDEX		
5	5.00 box	PARACETAMOL PROPHEAZONE CAFFEINE 250mg/150mg/50mg Tablet box of 120 Analgesic/Antipyretic	1,200.00	6,000.00
		branded SARIDON		
6	5.00 box	IBUPROFEN ADVANCE, 200mg Softgel Capsule box of 100	1,000.00	5,000.00
		branded MEDICOL ADVANCE		
7	5.00 box	MEFENAMIC ACID, 500mg Non-Steroidal Anti-Inflammatory Drug box of 100 Film Coated Tablet	300.00	1,500.00
8	5.00 box	SODIUM ASCORBATE WITH ZINC, 500mg/10mg Film-Coated Tablet box of 100 Branded	400.00	2,000.00
		MYREVIT		
9	5.00 box	CETERIZINE HCl, 10mg Film-Coated Tablet	150.00	750.00

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(Signature over printed name)

4-14-23
(Date)

By the Authority of the Governor: **EDWIN I. JUBAHIB**
Governor


ENGR. JOSIE JEAN R. RABANOZ, CE, MPA, EnP
Provincial Administrator

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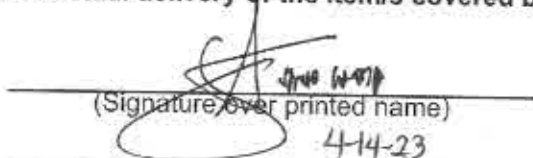

I.N.	Quantity/Unit	Item	Unit Cost	Amount
		box of 100 Branded CETICIT		
10	5.00 box	LOSARTAN POTASSIUM, 50mg Film-Coated Tablet	200.00	1,000.00
		box of 100 LOSAAR 50		
11	5.00 box	LORASTAN POTASSIUM, 100mg Film-Coated Tablet	350.00	1,750.00
		box of 100 LOSAAR 100		
12	5.00 box	AMLODIPINE BESYLATE, 5mg Tablet	200.00	1,000.00
		box of 100 AMLOTHIX		
13	1.00 box	HYOSCINE N-BUTYBROMIDE, 10mg Tablet	600.00	600.00
		box of 120 Branded HYOSAPH		
14	1.00 box	BISACODYL, 5mg Tablet	240.00	240.00
		box of 120 Branded		

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<u>4-14-23</u> (Date)	EDWIN I. JUBAHIB Governor

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Address : Door 1 Trebajo Building, Mabini St., Tagum City	 O20230308372AE437B78
PhilGEPS Registration No. : 325715 Tel./Fax No. : 06276081272 Registration Certificate : DTI	Date : Mar 24, 2023 P.R. No. : 2023010420 Procurement mode: Shopping B (Regular Purchase)
Req. Office : Provincial Disaster Risk Reduction Management	

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Place of Delivery : PGSO Warehouse		

I.N.	Quantity/Unit	Item	Unit Cost	Amount
DYLAX				
15	5.00 box	CARBOCISTEINE Mucolytic box of 100 500mg/ capsule MUCOLEM	300.00	1,500.00
16	2.00 box	LOPERAMAIDE HCI 2mg Tablet Antimotility Branded VEXIL	200.00	400.00
17	2.00 box	ALUMINUM HYDROXIDE MAGNESIUM HYDROXIDE SIMETICONE 178mg/233mg/30mg Chewable Tablet box of 100 KREMIL-S	1,000.00	2,000.00
18	3.00 box	LOPERAMAIDE HYDROCHLORIDE box of 100 2mg/Capsule Antimotility Branded FDA Registration #DR-XY24964 VEXIL	200.00	600.00

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PURCHASE ORDER

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P.O. Number: **2023030837**

Address : **Door 1 Trebajo Building, Mabini St., Tagum City**



O20230308372AE437B78

PhilGEPS Registration No. : **325715**

Tel./Fax No. : **06276081272**

Registration Certificate : **DTI**

Date : **Mar 24, 2023**

P.R. No. : **2023010420**

Procurement mode: **Shopping B (Regular Purchase)**

Req. Office : **Provincial Disaster Risk Reduction Management**

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Payment Term : **ON ACCOUNT**

Place of Delivery : **PGSO Warehouse**

Delivery Term: **10 Calendar Days**

I.N.	Quantity/Unit	Item	Unit Cost	Amount
19	10.00 packs	PAIN RELIEF PATCH 6.5 CM X 4.2 CM 10'S Menthol Branded SALONPAS	100.00	1,000.00
20	10.00 pcs	PAIN RELIEF RUB 50g Ointment menthol NH RUB	150.00	1,500.00
21	10.00 pcs	PAIN KILLER LINIMENT 60ml Counterirritant OMEGA PAIN KILLER	65.00	650.00
22	3.00 box	MULTIVITAMINS + IRON 100's Branded Capsule HANIZYN	300.00	900.00

Remarks :
NO EXTENSION OF DELIVERY ALLOWED
NO PARTIAL DELIVERY ALLOWED

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(Signature over printed name)
4-14-23

(Date)

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By the Authority of the Governor:

ENGR. JOSIE JEAN R. RABANOZ, CE, MPA, EnP
Provincial Administrator


EDWIN I. JUBAHIB
Governor

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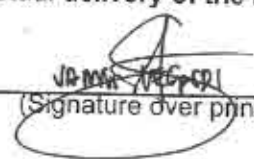
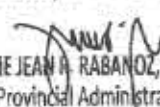
The award is based on Abstract No. **0320230573** created on **March 03, 2023** under Quotation No. **C20230533** opened on **February 23, 2023**

FOR USE OF PDRRMD- DRUGS AND MEDS FOR RESPONDERS 1ST QUARTER	
Grand Total Amount in Words : FORTY-ONE THOUSAND EIGHT HUNDRED NINETY AND XX / 100	GRAND TOTAL : ₱ 41,890.00

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