

## **PURCHASE ORDER** CITY GOVERNMENT OF PASIG

Agency Name

| Please of Delivery: Peals City General Hospital Date of Delivery: Peals City General Hospital Date of Delivery: Peals City General Hospital Delivery: Payment Term: 30 Calendar days Delivery: Term: 30 Calendar days Payment Term: within 45 days upon completion of deliver TEM NO. UNIT QTY DESCRIPTION COST AMOUNT 1 LOT 1 Preventive Maintenances trouble shooting, repair and replacement of part for Allquoating Device SN: 5,000.00 5,000.00 T/CD14799 2 PIECE 1 Heating Element, M610531, FRESENIUS KABI TOTAL Amount in Words One Hundred Fifteen Thousand Peace Only. In case of the failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for revery day of delay afrail be imposed.  Conforme: Block S. Ragafo SHELKE P. PATDU (Signature sety Present Hispity Gragather) Date  Funds Available: Amount in Words Office/Dept: Funds Available: Amount in Cost Office Accountant  Amount: (** 115., 000 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,93792 100 - 20,9379                                                                                                                                                                                                                                         | Supplier        | lier: GREPCOR, DIAMONDE INC. P.O. |                                         |               |                                              |                      |                      |          | O. No. : <b>22-09-1926</b>  |                    |                                                          |  |
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| Place of Delivery: Date of Delivery: Date of Delivery: Date of Delivery: Date of Delivery: Payment Term: within 45 days upon completion of delivery TITEM NO. UNIT QTY DESCRIPTION COST AMOUNT  1 LOT 1 Preventive Maintenanced Toyolde shooting, repair and replacement of part for Allquading Device Sh: 7CD14799  2 PIECE 1 Heating Element, M610531, FRESENIUS KABI 110,000.00 110,000.00  ******************************                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Address         |                                   |                                         |               |                                              |                      |                      |          | September 13,2022           |                    |                                                          |  |
| Payment Term: _within 45 days uson completion of deliver   Payment Term: _within 45 days uson completion of deliver   TTEM   WINT   QTY   DESCRIPTION   COST   AMOUNT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Gentlemen:      | Please fu                         | ırnish this offic                       | ce the follow | ing articles subject to th                   | e terms              | and condit           | tions co | ontained h                  | nerein:            | * · · · • · · · · · · · · · · · · · · ·                  |  |
| NO. UNIT QTY DESCRIPTION COST AMOUNT  1 LOT 1 Preventive Maintenancet Trouble shooting, repair and replacement of part for Allquoating Device SN: 7,000.00 5,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7,000.00 7 |                 |                                   |                                         |               |                                              |                      |                      |          |                             |                    | n completion of delivery                                 |  |
| NO. UNIT QTY DESCRIPTION COST AMOUNT  1 LOT 1 Preventive Maintenancet Trouble shooting, repair and replacement of part for Allquoating Device SN: 7.000.00 5,000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.0000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.0000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.0000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.000.00 7.0000.00 7.000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.00 7.0000.0000.00 7.0000.00 7.0000.00 7.0000.00 7.00000.0000.00 7.00000.00 7.00000.00 7.00000.00 7.00000.00 7.00000.00 7.00000.00 7.00000.0 | ITEM            |                                   |                                         |               |                                              |                      |                      | T        | UNI                         | r                  |                                                          |  |
| and replacement of part for Allquoaling Device SN: 7CD14799  2 PIECE 1 Heating Element, M610531, FRESENIUS KABI  110,000,00  110,000,00  110,000,00  110,000,00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | NO.             | UNIT                              | QTY                                     | DESCRIPTION   |                                              |                      |                      |          | COS                         | r                  | AMOUNT                                                   |  |
| For the use of PCGH- Laboratory Dept. for the use of Peeig City General Hospital  Control No. 3778  GRAND TOTAL: Php 115,000.00  Total Amount in Words   One Hundred Fifteen Thousand Pesos Only.  In case of the failure to make the full delivery within the time specified above, a penalty of one tenth (1/10)  of one (1) purcent for every day of delay shall be imposed.  Conforme: El Johd S. Engaño  Very truly yours.  Victor Ma. Regis N. SOTTO  (Authorized Official)  City Mayor  PAULO A. CASTRO JR, MD, PHD.  JUVY A. CUENCO/  Chief Accountant  Chief Accountant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1               | LOT                               | 1                                       | and replac    | placement of part for Aliquoating Device SN: |                      |                      |          | 5,                          | 000.00             | 5,000.00                                                 |  |
| Total Amount in Words   One Hundred Fifteen Thousand Pesos Only.  In case of the failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for every day of delay shall be imposed.  Very truly yours,  Victor MA. REGIS N. SOTTO  (Authorized Official)  (Signature over printed name of Supplier) (Signature over  |                 |                                   |                                         | ******        | ************* Nothing Follow                 | SENIUS<br>5 ******** | KABI<br>************ | ***      | 110,                        | 000.00             | 110,000.00                                               |  |
| Total Amount in Words   One Hundred Fifteen Thousand Pesos Only.  In case of the failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for every day of delay shall be imposed.  Very truly yours,  Victor MA. REGIS N. SOTTO  (Authorized Official)  (Signature over printed name of Supplier) (Signature over  | Control N       | 3778                              |                                         |               | 1                                            |                      |                      | 6        | DAND TO                     | TAL .              | Dbn 115 000 00                                           |  |
| In case of the failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for every day of delay shall be imposed.  Very truly yours,  VICTOR MA. REGIS N. SOTTO  (Authorized Official)  (Signature over printed name of Suppler)  Date  Requisitioning Office/Dept.:  Funds Available:  Amount: (1/5, 000- 100-2032-09- 100-2032-09- Authorized Official)  Authorized Official)  Amount: (1/5, 000- 100-2032-09- 100-2032-09- Authorized Official)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |                                   | ords One Hu                             | ndred Fifteen | Thousand Pesos Only                          | 1                    |                      |          | IVAND I                     | JIAL .             | F11p 113,000.00                                          |  |
| PAULO A. CASTRO JR., MD, PHD.  (Authorized Official)  Amount:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | In<br>of one (* | case of the f                     | El John S. SHEVA P. Pure oper printed n | Engaño ATDU   | within the time specified al nposed.         | pove, a pe           |                      | Ver      | y truly yo OR MA. I (Author | REGIS<br>rized Off | ficial)                                                  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 | O A. CAST                         | RO JR., MD,                             | PHD.          | )<br>A YVUL                                  |                      |                      |          | Amo                         | unt : 🖞            | 5, 000<br>  00 - 2023- 29-<br> 0292 - 44 24<br> Page - 1 |  |