

PURCHASE ORDER

CITY GOVERNMENT OF PASIG

Agency Name

Supplier:	SY MEDICAL TRADII	P.O. No. :		22-12-2196		
Address .	Suite 603 Gold Loon Twin	Towar iosa Maria Escriva Drivo Ortigas Contor San	Date:	01	December	20

Address: Suite 603 Gold Loop Twin Tower, jose Maria Escriva Drive, Ortigas Center, San Antonio, Pasigt City Mode of Procurement: DIRECT CONTRACTING

Gentlemen:

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

Place of Delivery: Pasig City Children's Hospital Delivery Term: Please refer to T.O.R

Date of Delivery :			Payment Term: within 45 days upon completion of delivery		
TEM IO.	DESCRIPTION	UNIT OTY	UNIT COST	AMOUNT	
	on of Zoll Sure Power Battery for M2-5		es Unit Defibrillator		
1	No. BA20F000104 - PICU : AG20FAs0233	LOT 1	2,000.00	2,000.00	
2	No. BA19E000027 - 4th Flr. : AG19CAS5071	LOT 1	2,000.00	2,000.00	
3	No. BA19E000058 - IPS 2 : AG19BAS2633	LOT 1	2,000.00	2,000.00	
	nent of LCD for SP20 Pulse Oximeter S		XCU151QK014008		
4	stal Display 6 months for Accessories/Spare parts and, of delivery. ************************************	UNIT 1	12,000.00	12,000.00	
Calibaria	NO 0 - 1 - 1/1 / 7 - 2/1 - 1/1 - 1 - 1	Han (7 - 1) C			
Calibrati	M2-Series Unit Defibrillator and replacemen	ation of Zoll Sure Powe	f SP20 Pulse Oximeter	for 1	

Nursing Service Office (PCCH-Child's Hope). for the use of Pasig City Children's Hospital

Total Amount in Words Eighteen Thousand Pesos Only.

4103

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 as provided for by the, 2016 IRR of RA 9184.

Very truly yours,

GRAND TOTAL:

(Signature of inted name of Supplier)

VICTOR MA. REGIS N. SOTTO (Authorized Official)

2022

City Mayor

Requisitioning Office/Dept.:

Control No.

Conforme:

MD, MMHOA

(Authorized Official)

Funds Available

JUVY A. CUENCO/ Chief Accountant

Amount: A

OBR No.:

Php 18,000.00