

PURCHASE ORDER CITY GOVERNMENT OF PASIG

Agency Name

Supplier: MEDMASTER, INC.							P.O. No. : 23-03-0077		
Address: 02 R19 Suntrust Capitol Plaza Building, Matalino, Suntrust Capitol Central 4, Quezon City Da						Date:			
				a de la	a second take d	Mode of Pro	curement: DIREC	T CONTRACTING	
Gentlemer		2.7	ture is opinit marke law. No	- s willed	DeBlet Walet in	91 0 0	di di		
	Please f	urnish this o	ffice the following articles subje	ct to the ter	ms and conditi	ons contain	ed herein:		
DI (F	. 1		11-11-11-11-11		D.1' T.	D-ft- T	0.0		
		asig City Chi	dren's Hospital	Delivery Term		days upon completion	on of delivery		
Date of Delivery :					UNIT				
NO.	UNIT	QTY	DESCRI	IPTION			COST	AMOUNT	
NO.	UNII	QII	DESCRI	ITION	ALIS BILLIORENTO	2, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		The American State of the State	
1	UNIT	1 ntenance of Stu	- Printer - 1 ea - Steam Trap 1/2 (Big) - 1 ea - Steam Trap (Small) 1 ea ************************************	201015-001 cluded 210 - 1 ea 213 - 1 ea	*********		429,000.00 Child's Hope, for the us	429,000.00	
	·					entrusti, en p Les grandou Les audit, lu	artnog		
Control N			aria de la companio		mark miletre vi i	GRAND	TOTAL :	Php 429,000.00	
Total Ar	nount in W	ords Four	Hundred Twenty-nine Thousand I	Pesos Only.	na) es viag luli	ladin ryw	uly		
Ir for eve	me:	NAMEY	the full delivery within the time spapesed as provided for by the, 2016 M. LLANES Intel name of Supplier)	IRR of RA 9	Very tr	uly yours, VICTOR			
p	ioning Offi	trione	D, MMHOA, DPBA, FPSA	unds Avail	able : JUVY A. CUEN Chief Account	ICON/	Amount :	9 429, 000 100. 2323-03.	
		Authorized O	/ - /				371	0098-4431	
			V						