



PURCHASE ORDER

CITY GOVERNMENT OF PASIG

Agency Name

Supplier : **BIOSITE MEDICAL INSTRUMENTS**
 Address : **Ground Floor 555 Manga Street Corner Luisa Street Juna Subd Davao City**

P.O. No. : **23-07-0465**
 Date : **07/28/2023**
 Mode of Procurement: **SMALL VALUE PROCUREMENT**

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

Place of Delivery : Please refer to TOR Delivery Term : Please refer to TOR
 Date of Delivery : - Payment Term : within 45 days upon completion of delivery

ITEM NO.	UNIT	QTY	DESCRIPTION	UNIT COST	AMOUNT
1	PACK	2	T3 reagent 24 cartridges/pack, WONDO FINACARE pack	7,300.00	14,600.00
2	PACK	2	T4 reagent 24 cartridges/pack, WONDO FINACARE pack	7,300.00	14,600.00
3	PACK	2	TSH reagent 24 cartridges/pack, WONDO FINACARE pack	7,300.00	14,600.00
4	PACK	2	PSA reagent 24 cartridges/pack, WONDO FINACARE pack	7,300.00	14,600.00
<p>*Purchase Order shall cover all the items found in the Request for Quotation, Terms of Reference/ Technical Specification, and Bid Bulletin/s, if any</p> <p>***** Nothing Follows *****</p>					

For the use of City Health Department-Laboratory for the use of City Health Office


Control No. **4696** GRAND TOTAL : **Php 58,400.00**

Total Amount in Words Fifty-eight Thousand Four Hundred 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 as provided for by the, 2016 IRR of RA 9184.

Very truly yours,

Conforme :


JULICORE AGRAVANTE
 (Signature over printed name of Supplier)
5-11-2023
 Date


VICTOR MA REGIS N. SOTTO
 (Authorized Official)
 City Mayor

Requisitioning Office/Dept. :


JOSEPH R. PANALIGAN, MD, MHA
 (Authorized Official)

Funds Available :


JUVY A. CUENCO
 Chief Accountant

Amount : ₱ 58,400.00
 OBR No. : 100-2023-03
0109-4411