

## PURCHASE ORDER CITY GOVERNMENT OF PASIG

Agency Name

Supplier	MEDILI	NES DISTRI	BUTORS INCORPORATED		P.O. No. :		23-07-0489	
Address	: 3rd Floor	Vistamall Hub.	.V. Starr Ave., Pamplona Dos, Las Piñas City	ity	Date :	<b>1</b> 9 JUL 2023		
					Mode of Procure	ement: PUBLIC BIDI	DING	
Sentlemen	:							
	Please fu	ırnish this off	ice the following articles subject to the	e terms and co	onditions contai	ned herein:		
Place of I	Dolinom.	Medical Sup	nlies Denet		Dolissons Town	. otoggovod o	on Torms of Deference	
Place of Delivery : Medical Su Date of Delivery :					Payment Term	Term: staggered - see Terms of Reference staggered - see Terms of Reference		
ITEM						UNIT		
NO.	UNIT	QTY	DESCRIPTION	N	- 1	COST	AMOUNT	
21	galloon	4,800	LOT NO. 5 - CHAMP DIALYSIS: Hemodialysis Solution (Acid Concentrate) 5 liter,		10-000-0	295.00	1,416,000.00	
	ga	,,,,,,,	SOLUCID AC 11	Armidio, o mor		200,00	1,410,000.00	
						et de set anneg de		
22	pack	2,700	Hemodialysis Solution (Bicarbonate SOLUCARB BC 03-8.4%	e) 840g Powde	er,	149.60	403,920.00	
			30E30AND 50 03-0.476					
	\$4.000 THE RESERVE TO STATE OF	Try 4				Sub Total :	1,819,920.00	
			**************************************	*********	*****			
			and a second of second or					
NOT	E: Purchas∉	e Order shall	cover all items in accordance with the	e Terms of Re	ference			
Control N	lo. 4711			4,4(4)	GRA	ND TOTAL :	Php 1,819,920.00	
Total An	nount in W	ords One M	illion Eight Hundred Nineteen Thousand	d Nine Hundred	d Twenty Pesos (	Only.		
			the full delivery within the time specified a				cent	
for ever	y day of dela	ay shall be imp	osed as provided for by the, 2016 IRR of F	RA 9184.	0.	o, o, o, o (1) po,		
						-4		
					Very I	truly yours,		
					HON VICT	OR MA. REG	S COTTO	
Conform	e:	M				(Authorized O		
_			VIN NICOLAS			City Mayo		
	(Signatu	re over printed	name of Supplier)					
		<u>08/13/</u>						
		Du						
_			T		( 1.)A			
Requisiti	oning Offic	e/Dept.:	1	Funds Availa	able:			
			$^{\prime\prime}$		Jus	A-ma	nt 1819 920.6	
		4	/./	JUVY	A. QUENCO		nt: \$ 1,819,920.6	
	JOSI		ALIGAN, MD, MHA		f Accountant U	OBR N	o.: 100-2023-08	
		(Aythorize	ed Official)				0298-4411	
		/					Page - 1	