

## PURCHASE ORDER CITY GOVERNMENT OF PASIG

Agency Name

Supplier :	plier: STA. ANA ENTERPRISES P.O.					No. : 23-09-0617		
Address :					Date			
Gentlemen:					Mode	of Procurement: D	RECT CONTRACTING	
Germemen.	Please fu	ırnish this offic	ce the following articles s	subject to the terms and	l conditions c	ontained herein:		
Place of Del Date of Del		asig City Childr	ren's Hospital		Delivery Term : Refer to Terms of Reference Payment Term : within 45 days upon completion of delivery			
ITEM				7-11	<del>*************************************</del>	UNIT		
NO.	UNIT	QTY	DES	SCRIPTION		COST	AMOUNT	
1	UNIT	1	Clinical Chemistry Analyzer Cobas Integra 400		180,000.00	180,000.00		
2	UNIT	1	Electrolyte Analyzer AVL 9180		48,000.00	48,000.00		
3	UNIT	1	Immunology Analyzer Cobas e411		180,000.00	180,000.00		
		a zátszírek regat e ho	Purchase Order shall cover all the items found in the Request for Quotation, Terms of Reference/ Technical Specification and Bid Bulletin/s if any.					
	in Paper I to the interest in the in the factor of the interest of the interes		**************************************	othing Follows *******	********			
				general mengaming persentang ang mangang mengang persentang di persentang di persentang di persentang di perse Persentang di persentang d		And the second s		
the product of the control of						The second secon		
		n 11'5 '1						
						K 2 1 2		
		7 II i i						
the second secon		nder ng				Record and the second		
entrance and a second						Opinion de la companya del companya del companya de la companya de		
						d Programme		
A second								
		The Parish						
Popair and	d Proventive	Maintenance of \	/arious Equipments for the use	of Laboratory Department (PC		) for the use of Booig City	Children's Haspital	
Nepali and	a Fleventive	Maintenance or v					Crindren's Hospital	
		1 1	propertion the free those distributions of the free transfer of the first of the fi					
Control No. 4867						GRAND TOTAL:	Php 408,000.00	
Total Amo	ount in W	ords Four Hu	ndred Eight Thousand Peso	os Only.	and approx	er yera ar ar ar erg		
			the full delivery within the tin sed as provided for by the, 2		alty of one tenti	n (1/10) of one (1) perc	ent	
•			nage of the most limb feet					
-1					Ve	ry truly yours,		
Conforme		ysii oo oo Ka waxabaan yaa			VIC:	FOR MA REGIS	LECTIO	
0.00	ARIA VIC	XIIIIIXIII	ROMAN SANTOS		VIC	(Authorized Offi		
(Signature over printed name of Supplier)						City Mayor		
		Da	<del>- 20 5 -</del>					
		24						
					<u>'</u>			
Requisition	ning Offic	re/Dept ·		Funds Available :	(-)			
2. Cquisitio	٠ر	a cool			11	Amount:	468,060.00	
JOSELITO	T. MORE	TE, MD. MMI	HOA, DPBA, FPSA	JUVY A. CUE	NCO 1	OBR No. : 10	0-2623-09	
		thorized Officia		Chief Accoun		() ()	195 - 4471 Page - 1	