

PURCHASE ORDER CITY GOVERNMENT OF PASIG

Agency Name

9 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3						P.O. No. : 23-11-0756		
Address	Address: 241 High Pointee Medical hub Shaw blvd cor I. Cruz Brgy. Bagong Silang					Date: 11/06/2023 Mode of ProcurementSMALL VALUE PROCUREMENT		
Gentlemen:		rnish this offic	ce the following artic	cles subject to the te	rms and conditi	ons cor	ntained herein:	
Place of Delivery :Please refer to the TOR						Delivery Term : Please refer to the TOR Payment Term : within 45 days upon completion of deliver		
ITEM NO.	UNIT	OTY		DESCRIPTION			UNIT COST	AMOUNT
13	вот	40	Chlorhexidine Gluconate Solution 4%, HANSOL/INDIA topical solution, antiseptic 500ml/pump bottle			and the second s	700.00	28,000.00
		*Purchase Order shall cover all the items found in the Req for Quotation, Terms of Reference/Technical Specification. Bid Bulletin/s, if any. ***********************************					n ang Nought : The	
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						and a province of the second		
Purchas	se of Various	Medical Suppl	ies for the use of PCC	CH & PCGH, for the use	e of Pasig City Ch	ildren's l	Hospital	
						The state of the s		
		HII a						
Control No						G	RAND TOTAL:	Php 28,000.00
ln :		ailure to make t		s Only. the time specified abov the, 2016 IRR of RA 9			(1/10) of one (1) per truly yours,	cent
Conform		FERDINAND tre over printed i	N. VILLON	A servey count of the country of the	The many	/ICTO	R MA REGIS N (Authorized Office City Mayor	
		Dai	11/18/10/25					
		0,644,040,000	I					
Requisitio	e/Dept.:	Fun	J.H.			28,000.60		
JOSELITO		ΓE, MD, MMH ed Official)	IOA, DPBA FPSA	JUVY A. C. Chief Accoun			OBR No. : 100	6-2023-65 231-4431
		est .						Page - 1