



PURCHASE ORDER

CITY GOVERNMENT OF PASIG

Agency Name

Supplier : <u>SEAMMED PHARMA</u>	P.O. No. : <u>24-04-1216</u>
Address : <u>784 Maria Clara St., Brgy. Plainview, Mandaluyong</u>	Date : <u>23 APR 2024</u>
Mode of Procurement: <u>PUBLIC BIDDING</u>	

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

Place of Delivery : <u>Medical Supplies Depot</u>	Delivery Term : <u>see Terms of Reference</u>
Date of Delivery : _____	Payment Term : <u>see Terms of Reference</u>

ITEM NO.	UNIT	QTY	DESCRIPTION	UNIT COST	AMOUNT
2	TAB	700,000	HR (INH 150mg + INH 75mg) tablet, FIXCOM 2 HR (RIFAMPICIN 150MG + INH 75MG) TABLET	5.80	4,060,000.00
6	TAB	8,000	Ethambutol 400mg tablet, DRUGMAKER'S LABORATORIES, INC. ***** Nothing Follows *****	3.65	29,200.00

Note : Purchase Order shall cover all the items in the attached Terms of Reference.

Control No. <u>5514</u>	GRAND TOTAL :	Php 4,089,200.00
Total Amount in Words <u>Four Million Eighty-nine Thousand Two Hundred Pesos Only.</u>		

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.

<p>Conforme: </p> <p style="text-align: center;"><u>HEROLD HERNANDEZ</u> (Signature over printed name of Supplier) <u>5/06/2024</u> Date</p>	<p>Very truly yours,</p> <p></p> <p><u>VICTOR MA REGIS N. SOTTO</u> (Authorized Official) City Mayor</p>
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Requisitioning Office/Dept. : <u>JOSEPH R. PANALIGAN MD, MHA</u> (Authorized Official)	Funds Available : <u>JUVY A. CUENCO</u> Chief Accountant	Amount : <u>4,089,200.00</u> OBR No. : <u>100-2024-01-0017</u> <u>4411</u>
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