

Republic of the Philippines  
Province of Davao del Norte  
Government Center, Mankilam, Tagum City

**PURCHASE ORDER**Supplier : QUALI-MEDS MARKETINGP.O. No. : 2020030955

PhilGEPS Registration No. :

Date : March 05, 2020Address : PRK. 5 IMMACULATE, LUBOGAN, TORIL, DAVAO CITYMode of Procurement : SVPTel / Fax #: (082) 293-1626Registration Certificate : SECP.R. No. : 20021424

Req. Off.: Provincial Health Office

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

Place of Delivery PGSO WarehouseDate of Delivery: 7/10, 7/23, 7/29, 8/13/2020Delivery Term: 5 Calendar Day/sPayment Term : ON ACCOUNT

Item No.	Quantity/Unit	Description	Unit Cost	Amount
1	<u>150</u> BXS.	BRANDED AZITHROMYCIN 500MG. TAB. 3'S	60.00	9,000.00
2	<u>150</u> BXS.	BRANDED COTRIMOXAZOLE 800MG. TAB. 100'S - KATHREX	198.00	29,700.00
3	<u>150</u> BXS.	BRANDED ISONIAZID 400MG. TAB. 100'S	250.00	37,500.00
4	<u>25</u> BXS.	BRANDED DOXYCYCLINE 100MG. TAB. 100'S	130.00	3,250.00

## NOTE:

- ALL BIDDERS ARE REQUIRED TO ATTACH CPR.
- BIDDERS MUST SPECIFY/INDICATE BRAND NAME OF THEIR PRODUCTS
- ALL DELIVERED MEDICINES & SUPPLIES MUST BE AT LEAST 1 YEAR OR MORE PRIOR TO ITS EXPIRY DATE
- TO BE DELIVERED 5 CALENDAR DAYS UPON RECEIPT OF P.O.
- NO PARTIAL DELIVERY IS ACCEPTED & NO REQUEST FOR EXTENSION BE GRANTED
- TO BE AWARDED INDIVIDUAL BASIS.

The award is based on Abstract No. 0220200831dated February 27, 2020 under Quotation No. C20200762

FOR USE OF STI, HIV/AIDS PREVENTION &amp; CONTROL PROGRAM OF PHO-DAVAO DEL NORTE.

79,450.00

GRAND TOTAL : P

79,450.00

Grand Total Amount in Words :

SEVENTY NINE THOUSAND FOUR HUNDRED FIFTY and 0/100

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three(3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme:

Very truly yours,

Kathrina Basurmay  
(Signature over printed name)

EDWIN I. JUBAHIB  
Governor

6-19-2020

(Date)

By the Authority of the Governor

JOEFREY C. MIRAFONTES, MPA  
Admin. Officer V

NOTE : This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the vouchers.