POYONG

## Republic of the Philippines

Province of Davao del Norte

Government Center, Mankilam, Tagum City

## PURCHASE ORDER

Supplier : DAVAO INTERNATIONAL MEGA GAS CORP. (MEGA GAS)

P.O. No.: 2021072717

PhilGEPS Registration No. : 2004-17462

Date : July 02, 2021

Address : KM.25,LICANAN,BUNAWAN,DAVAO CITY

Mode of Procurement: Bidding

Tel / Fax #: 236-0257

Registration Certificate DTI P.R. No. : 21031694

Req. Off.: PEEDO - ADMIN.

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

Place of Delivery ON SITE

Date of Delivery:

Item No.

2

Payment Term : ON ACCOUNT

Description

Delivery Term: End-users shall require the delivery of items in such quantity, depending on actual needs.

1 3,600 CYL

Quantity/Unit

**OXYGEN GAS MEDICAL STANDARD-REFILL** 

450.00

Unit Cost

1,620,000.00

Amount

360 CYL

OXYGEN GAS MEDICAL FLASK TYPE-REFILL

300.00

108,000.00

TERMS AND CONDITION:

1.) DELIVERY TERM: END-USERS SHALL REQUIRE THE DELIVERY OF ITEMS IN SUCH QUANTITY, DEPENDING ON ACTUAL NEEDS.

- 2.) MODE OF PAYMENT: MONTHLY BASIS.
- 3.) BIDDING FOR ONE (1) YEAR SUPPLY BUT DELIVERY SHALL BE ON A WEEKLY BASIS.
- 4.) INITIAL DELIVERY MUST BE 150 CYLINDERS OF STANDARD OXYGEN GAS AND 30 CYLINDERS OF FLASK TYPE OXYGEN GAS, BUT ADDITIONAL QUANTITY SHALL BE REQUIRED AS THE NEED ARISES.
- 5.) ISSUANCE OF SALES INVOICE/CHARGE INVOICE AND PROCCESING OF PAYMENT IS ON MONTHLY BASIS. BASE

FOR THE CONSUMPTION OF THE THREE DISTRICT HOSPITAL

GRAND TOTAL :P

1,728,000.00

Grand Total Amount in Words :

ONE MILLION SEVEN HUNDRED TWENTY EIGHT THOUSAND 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,

**EDWIN I. JUBAHIB** Governor

(Signature over print d name)

AKIEL PONTEMO

13/21

By the Authority of the Governor:

Avaler. R. RABANOZ, MPA, ENP ENGR. JOSIE JEAN Provincial Administrator

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 voucher.

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Payment Term : ON ACCOUNT

Delivery Term: End-users shall require the delivery of items in such

quantity, depending on actual needs.

Item No.

Quantity/Unit

Description

Unit Cost

Amount

ON THE CONSUMTION OR QUANTITY DELIVERED.

6.) THE ISSUANCE OF SALES INVOICE MUST BE ON EVERY 1ST WEEK OF THE SUCCEDING MONTH.

7.) TOTAL LOT AWARDING

8.) THE SUPPLIER SHOULD INFORM THE R.O. INSPECTORATE TEAM UPON DELIVERY OF THE ITEMS.

ALL ITEMS TO BE CHARGE TO THE THREE (3) DDN HOSPITAL MOOE UNDER THE MEDICAL, DENTAL AND LABORATORY SUPPLIES ACCOUNT.

\*\*\*KAPALONG ZONE: P576,000.00

\*\*\*CARMEN ZONE: P576,000.00

\*\*\*IGACOS ZONE-P576,000.00

The award is based on Abstract No.

0620212570

dated June 17, 2021 under Bid No. B20210260

opened on June 17, 2021

FOR THE CONSUMPTION OF THE THREE DISTRICT HOSPITAL

SUB TOTAL

: P

GRAND TOTAL : P

1,728,000.00

Grand Total Amount in Words :

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Conforme:

17 moremo

(Signature over printed name)

Very truly yours,

**EDWIN I. JUBAHIB** Governor

By the Authority of the Governor:

ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP Provincial Administrator

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