



PURCHASE ORDER

Supplier : **NEW UNITED LAMINATED FLOORING SUPPLY INC.**

P.O. Number: **2023072519**



O20230725192B189033D

Address : **888 NATIVIDAD'S TOWNHOUSE, BACACA ROAD, DAVAO CITY**

Date : **Jul 06, 2023**

PhilGEPS Registration No. : **201703173312314647224**

P.R. No. : **2023042707**

Tel./Fax No. : **09336190064**

Registration Certificate : **SEC**

Procurement mode: **Bidding**

Req. Office : **Provincial Health Office**

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

Date of Delivery : _____ Payment Term : **ON ACCOUNT**

Delivery Term: **30 Calendar Days**

Place of Delivery : **PGSO Warehouse**

I.N.	Quantity/Unit	Item	Unit Cost	Amount
1	928.00 pcs	BP apparatus(Aneroid Sphygmomanometer) with Stethoscope Accessories: 1. Sleeve or tube cuff (appropriate upper arm circumference: 22-32cm 2. Pump of inflation pear with cap 3. Pouch included Note: DO NOT USE non-original accessories and parts for this device. When disinfecting the bracelet, do it with alcohol swab. Specifications: - Measuring Range: 20 ~ 300mmHg - Precision: ±3mmHg - Pressurization System: Manual pressure fed through the pump or rubber bulb - Deflation system: Manual air release valve -Weight .86 kg -Dimensions 23 × 16.3 × 8 cm -ISO APPROVED ALPK2 OR AT LEAST EQUIVALENT MADE IN JAPAN	2,985.50	2,770,544.00

Remarks :

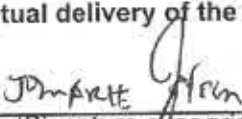
Please see the attach file for reference..

BP APP for Volunteer Workers to perform daily duty in taking vital signs of patients seeking health check up and treatment in their respective AOR

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 :



(Signature over printed name)

SEP-18-2023

(Date)

Very truly yours,
By the Authority of the Governor*


ENGR. JOSIE JEAN R. RANZOS, CE, MPA, EnP
Provincial Administrator

EDWIN I. JUBAHIB
Governor

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.

ALEJANDRO R. OMILA JR.



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The award is based on Abstract No. **0620231883** created on **June 08, 2023** and resolved on **July 06, 2023** under Quotation No. **B20232264** opened on **June 08, 2023**

BP APP for Volunteer Workers to perform daily duty in taking vital signs of patients seeking health check up and treatment in their respective AOR

Grand Total Amount in Words : **TWO MILLION SEVEN HUNDRED SEVENTY THOUSAND FIVE HUNDRED FORTY-FOUR AND XX / 100**

GRAND TOTAL : **₱ 2,770,544.00**

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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 :

JOHANNIE JOSTEN
(Signature over printed name)

SEPT. 10, 2023
(Date)

Very truly yours,
By the Authority of the Governor*

JOSIE JEAN R. RARANOS
ENGR. JOSIE JEAN R. RARANOS, CE, MPA, EnP
Provincial Administrator

EDWIN I. JUBAHIB
Governor

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ALEJANDRO R. OMILA JR.