




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

PURCHASE ORDER

Supplier : CDC MED INC.	P.O. Number: 2024114116
Address : # 11 SOLID ST. JEROME AGDAO, DAVAO CITY	 O2024114116748B31B50
TIN: 601-973-313-000	Date : Nov 13, 2024
PhilGEPS Registration No. : 2022042952651654280575	P.R. No. : 2024084607
Tel./Mobile/Fax No. : 09157136177	Procurement mode: Shopping B (Regular Purchase)
Registration Certificate : SEC	
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: 15 Calendar Days
Place of Delivery : PHO		

I.N.	Quantity/Unit	Item	Unit Cost	Amount
1	10.00 PAIR	DISPOSABLE GLOVES LARGE 50'S	200.00	2,000.00
2	15.00 PAIR	DISPOSABLE GLOVES MEDIUM 50'S	200.00	3,000.00
3	32.00 BOT	SODIUM HYPOCHLORITE (MULTI-PURPOSE DISENFECTANT AND CLEANER)	180.00	5,760.00
4	2,000.00 PCS	DRUG TESTING KIT WITH URINE CONTAINER	50.00	100,000.00
5	75.00 bot	Isopropyl alcohol , 70 % solution , 1liter	200.00	15,000.00
6	15.00 BOX	EXAMINATION GLOVES (SMALL)	300.00	4,500.00

The award is based on Abstract No. **0920242953** created on **September 04, 2024** under
 Quotation No. **C20243902** opened on **August 29, 2024**


MEDICAL SUPPLIES TO BE USE FOR DRUG TESTING LABORATORY	
Grand Total Amount in Words : ONE HUNDRED THIRTY THOUSAND TWO HUNDRED SIXTY AND XX / 100	GRAND TOTAL : ₱ 130,260.00

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)

 (Date)

Very truly yours,

GALE GUADALUPE S. MONTELLERO, MSW, LGS, IFPMW
 Assistant Provincial Administrator (Administration)
EDWIN I. JUBAHIB
 Provincial Governor

 (Date)

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.

RHEA GIN M. RAMOS