




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

## PURCHASE ORDER

Supplier : <b>EAH MEDICINE &amp; MEDICAL SUPPLIES MARKETING</b>	P.O. Number: <b>2024124691</b>
Address : <b>IGACOS DAVAO DEL NORTE</b>	 <b>O20241246915800BB4C1</b>
TIN: <b>254-115-843-000</b> PhilGEPS Registration No.: <b>201903484741084242891</b> Tel./Mobile/Fax No.: <b>09561675352</b> Registration Certificate : <b>DTI</b>	Date : <b>Dec 13, 2024</b> P.R. No. : <b>2024106629</b> Procurement mode: <b>Competitive Bidding</b>
Req. Office : <b>Provincial Health Office</b>	

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

Date of Delivery : _____	Payment Term : <b>ON ACCOUNT</b>	Delivery Term: <b>20 Calendar Days</b>
Place of Delivery : <b>PHO WAREHOUSE</b>		

I.N.	Quantity/Unit	Item	Unit Cost	Amount
1	23,546.00 Tablet	Isoniazid + Rifampicin + Pyrazinamide + Ethambutol 75 mg + 150 mg + 400 mg + 275 mg Tablet -INTENSIVE <b>QUADMAX</b>	12.00	282,552.00
2	47,040.00 TAB	ISONIAZID+REFAMPICIN 75MG+150MG -CONTINUATION <b>GENERIC</b>	6.23	293,059.20

- Remarks :
- TERMS AND CONDITIONS
1. THE ITEM MUST CONFORM TO THE DESCRIPTION AS STATED IN THE BID DOCUMENT.
  2. THE ITEM MUST HAVE CERTIFICATE OF PRODUCT REGISTRATION (CPR) ISSUED BY THE PHILIPPINE FOOD AND DRUG ADMINISTRATION THAT TO BE SUBMITTED UPON DELIVERY.
  3. THE EXPIRATION DATE OF ITEMS TO BE OFFERED SHOULD NOT BE LESS THAN TWO YEARS UPON DELIVERY.
  4. THE SUPPLIER MUST HAVE VALID AND CURRENT LICENSE TO OPERATE AS DRUG DISTRIBUTORS/WHOLESALERS ISSUED BY THE PHILIPPINE FOOD AND DRUG ADMINISTRATION.
  5. ALL MULTIVITAMINS CAP.& SYRUP WITH NO APPROVED THERAPEUTIC CLAIM LABEL IS NOT ACCEPTED
  6. WINNING BIDDERS WILL BE THE ONE TO SHOULDER THE PAYMENT FOR BFAD SAMPLING
  7. SUPPLIER MUST INFORM THE R. O. INSPECTORY TEAM UPON DELIVERY OF THE ITEMS.

The award is based on Abstract No. **1120244449** created on **November 26, 2024** and resolved on **December 06, 2024** under Quotation No. **B20245711** opened on **November 25, 2024**

<b>DRUGS AND MEDICINES TO BE USE FOR TB PATIENTS</b>	
Grand Total Amount in Words : <b>FIVE HUNDRED SEVENTY-FIVE THOUSAND SIX HUNDRED ELEVEN AND 20 / 100</b>	GRAND TOTAL : <b>₱ 575,611.20</b>

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, \_\_\_\_\_

(Signature over printed name) **EDWIN LOUBAHIB**  
Provincial Governor

\_\_\_\_\_  
(Date) **11/9/25** \_\_\_\_\_  
(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