

Item No.	Quantity	Units of Issue	Item Description	Estimated Unit Cost	Estimated Cost
1	100	amp	Anti-tetanus Serum 5,000 i.u. ampule	140.00	14,000.00
2	50	amp	Anti-tetanus Serum 3,000 i.u. ampule	100.00	5,000.00
3	100	vial	Ampicillin 250mg vial	22.00	2,200.00
4	50	vial	Ampicillin 500mg vial	21.00	1,050.00
5	10	box	Celecoxib 200mg capsule 100's	1,200.00	12,000.00
6	20	box	Losartan 50mg tablet 100's	300.00	6,000.00
7	5	box	Losartan +HCTZ 50mg/12.5mg tab 100's	700.00	3,500.00
8	20	amp	Vitamin B complex 3ml ampule (IM/IV)	75.00	1,500.00
9	200	amp	Tetanus Toxoid 40mg. i.u. x 0.5ml amp.	45.00	9,000.00
Total					54,250.00

PHILIPPINE NATIONAL DRUG FORMULARY (PNDF) RECEIVED BY: *[Signature]* DATE: 6/23/20
 PROVINCIAL PROCUREMENT AND MANAGEMENT UNIT
 DEPT. OF HEALTH - CARMEN, BOHOL
 AMOUNT: ₱ 54,250.00
 OK AS TO APP. RSC#

CERTIFICATION

I hereby certify that requested medicines conform with Philippine National Drug Formulary,PNDF.

[Signature]
MA. RAZ B. GENSON
 Pharmacist

Purpose : For patients use

Condition * Bid by lot
 Period of Delivery : 10 days after receipt of P.O.
 Place of Delivery : Cong. Simeon G. Toribio Memorial Hospital, Carmen, Bohol
 Time of Delivery : During office hours.

Requested by: *[Signature]* Cash Availability: _____ Approved by: *[Signature]*
 Signature
 Printed Name **JOSEPHINE B. JABONILLO, MD,RN.MPA** **EUSTAQUIO A. SOCORIN** **ARTHUR C. YAP**
 Designation **Department Head** **Provincial Treasurer** **Governor**

BY AUTHORITY OF THE GOVERNOR:
[Signature]
ATTY. KATHYRIN FED. PIOQUINTO
 Provincial Administrator

PROVINCIAL BUDGET OFFICE
 PROVINCE OF BOHOL
 CONTROL NO. 839 REC'D BY: *[Signature]* DATE: 6/16/20
 MARK NO. 1713 VALID UNTIL: 12/31/20
 442227
 2019-018
 AMOUNT: ₱ 54,250.00
 CONTROLLED BY: *[Signature]* DATE: 6/16/20
PETER S. PETOTAL, CPA
 B O

4
 6/17/20