



PURCHASE REQUEST
PROVINCE OF BOHOL



9/11/20

PR No.

Date: September 3, 2020

Department: **Catigbian District Hospital**

Date:

Section: **Administrative and Support services**

ALOBS
No.

Date:

Item No.	Quantity	Unit of Issue	Item Description	Estimated Unit Cost	Estimated Cost
1	2	units	Biometric fingerprint time and attendance machine	10,000.00	20,000.00
3	2	units	Computer monitor 24 inches	10,000.00	20,000.00
	2	pieces	External Hard Drive 2TB	5,000.00	10,000.00

Handwritten: P10-2020-295
 RECEIVED BY: *[Signature]* DATE: 9/18/20
 PROVINCIAL PURCHASEMENT MANAGEMENT UNIT
 AMOUNT: 50,000.00
 OK AS TO A/P

TOTAL:

50,000.00

Purchased by: Item
 Delivery Time: Seven (7) days after receipt of P.O.
 Place Delivery: Catigbian District Hospital

BY AUTHORITY OF THE GOVERNOR

Purpose: For the use of the hospital administrative and support services

Requested by:	Cash Availability:	APPROVAL
<i>[Signature]</i>		<i>[Signature]</i>
Signature:		ATTY. KATHYRIN FE D. PIOQUINTO
Printed Name: ESTERLITA A. TUBAL, M.D.	EUSTAQUIO A. SOCORIN	PROVINCIAL ADMINISTRATOR
Designation: Chief of Hospital I	Provincial Treasurer	ATTY. ARTHUR C. YAP
		Governor

By Authority:

ATTY. KATHYRIN FE D. PIOQUINTO
Provincial Administrator

C-6.

PROVINCIAL BUDGET OFFICE
 PROVINCE OF BOHOL
 CONTROL NO. 1289 RECORDED DATE: 9/10/20
 MARK NO. 2783 VALID UNTIL: 12-31-20
 EXPENSE CODE 10705030 AMOUNT 50,000.00
 PUN SOURCE GF CONTROLLED DATE: 9/10/20
 PETER PUSM R. TOTAL OFF
 BMO