HOS

Standard Form Number: SF - GOOD-58

Revised on: May 24, 2004

Standard Form Title: Purchase Order

Direct Contracting No. - PHO - 2021 - 059

P.R. No. - PHO - 2021 - 081

PURCHASE ORDER

FRANCISCO DAGOHOY MUNICIPAL HOSPITAL, INABANGA, BOHOL

Agency/Procuring Entity

P0019-12

Supplier :		DEXTEL TRADING		D.O. No. :	P.O. # - PHO - 2021 - 072	
Address :		0410, Tamblot Street, Cogon District, Tagbilaran City		Date :	June 04, 2021	
Telephone No.:				Mode of	Direct	
				Procurement :	Procurement : Contracting	
			<u> </u>	_ _		<u> </u>
Gentlemen Plea			ice the following articles subject to t	the terms and conditi	ons contained l	nerein:
		GOVERN	OR'S OFFICE, NEW CAPITOL BUILDING	, Delivery Term: Please	e read Terms &	Conditions at
Place of Delivery:			OGON DIST., TAGBILARAN CITY	the back hereof		
Date of Deliv Warranty Pe	-	FOURTEEN (14) DAYS UPON RECEIPT OF NOTICE TO PROCEED THREE (3) MONTHS		Payment Term: Upon Completion of Delivery		
eramancy re						
Item No.	QTY	UNIT	DESCRIPTION OF SU	IPPLIES	UNIT COST	AMOUNT
1	5	boxes	Hemoglobin A1C (HBA1C) 25T/box	<u> </u>	12,306.80	61,534.00
			X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-	<u> </u>		
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(total amount in words) SIXTY ONE THOUSAN		FIVE HIMDRED THIRT	V EOLID DESOS (NI V		
(total amo			SIXTY ONE THOUSAND			
of one (1) n			o make the full delivery within the tim of delay shall be imposed.	ne specified above, a p	enalty of one-te	ntn (1/10)
0.0(2, p			7,			
Conforme:			/	Very truly yours,		
	r	SEVTEI A	PADING	νττα	Y. ARTHUR C. YA	ΔP
<u>DEXTEL/TRADING</u> Signature over printed name of Supplier				Governor		
Jigii		,			Coremo	
	k	1 الالول	1 2321	By Autho	rity of the Gov	/ernor:
		Dat	e	ATTY. KATH Provin	FE D. Ple ncial Administr	
Funds Av	ailable:		/	-		
			7	Earmarked No. :		999
			OSOCORIN (/	Amount :	P 61	,534.00
II		rovincial 1		l		