

PURCHASE ORDER
 - CLARIN COMMUNITY HOSPITAL, CLARIN, BOHOL
 Agency/Procuring Entity

Supplier : LABMATE PHARMA INC. D.O. No. : P.O. # - PHO - 2021 - 159
 Address : 3rd Floor Jafer Bldg., 118 West Avenue, Quezon City, Philippines Date : August 23, 2021
 Telephone No.: _____ Mode of Procurement : Negotiated
 TIN : _____

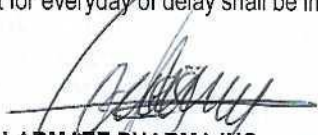
Gentlemen/Mesdames:
 Please furnish this Office the following articles subject to the terms and conditions contained herein:


Place of Delivery: GOVERNOR'S OFFICE, NEW CAPITOL BUILDING, TAGBILARAN CITY Delivery Term: Please Read Terms & Conditions at the back hereof.
6-10 DAYS UPON RECEIPT OF NOTICE TO PROCEED
 Date of Delivery : PROCEED Payment Term: Upon Completion of Delivery
 Warranty Period: THREE (3) MONTHS


Item No.	QTY	UNIT	DESCRIPTION OF SUPPLIES	UNIT COST	AMOUNT
1	100	kits	COVID - 19 Ag Rapid Test Device Nasopharyngeal	790.00	79,000.00
			x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x		WWWWWWW

(total amount in words) **SEVENTY NINE THOUSAND PESOS ONLY**

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one (1) percent for everyday of delay shall be imposed.

Conforme: 
LABMATE PHARMA INC.
 Signature over printed name of Supplier
AUG 27 2021
 Date

Very truly yours,
ATTY. ARTHUR C. YAP
 Governor
 By Authority of the Governor

ATTY. KATHYRIN FE D. PIOQUINTO
 Provincial Administrator
 Date approved: AUG 23 2021

Funds Available: 
EUSTAQUIO A. SOCORIN
 Provincial Treasurer

Earmarked No. : 1628
 Amount : P 85,000.00