



**PURCHASE ORDER**

**BOHOL PROVINCIAL DIAGNOSTIC & AMBULATORY CARE CENTER**

Agency/Procuring Entity

00074-4

Supplier :	<b>IRASETH PHARMA INC.</b>	D.O. No. :	P.O. # - PHO - 2021 -215
Address :	<u>4th Floor, EGT Building, #77 JM Basa Street,</u> <u>Kalumpang, Marikina City</u>	Date :	September 28, 2021
Telephone No. :		Mode of Procurement :	Negotiated Mode
TIN :	<b>008-566-056-000</b>		Small Value

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.

Date of Delivery : FIVE (5) DAYS UPON RECEIPT OF NTP

Warranty Period: Three (3) Months Payment Term: Upon Completion of Delivery

Item No.	QTY	UNIT	DESCRIPTION OF SUPPLIES	UNIT COST	AMOUNT
1	1	unit	Medical Gooseneck Lamp Aluminum, clear lacquer	3,550.00	3,550.00
2	1	unit	Suction machine - light weight, heavy duty motor, high negative pressure, oil free pump, operated silent, 2 chambers	12,500.00	12,500.00
3	1	unit	Emergency megafiber optic laryngoscope fiber optic stubby handle, mega mac blade size 1-4	24,300.00	24,300.00
4	1	unit	Ultrasonic nebulizer kit medication capacity - 10ml power: 220 VAC 50HZ; power consumption: about 80L0 MMAD 4.0UM; Compressor pressure range 30-36	2,950.00	2,950.00
5	6	pcs	Surgical scissor	185.00	1,110.00
6	20	pcs	Medical tourniquet	35.00	700.00
7	2	pcs	Pulse oximeter/low oxygen alarm, CMS 50D2 oximeter auto power off, dimension 60x31x32M	1,680.00	3,360.00
8	5	pcs	Endotracheal tube #7.0 mm I,D 7mm O.D 9.4mm PVC material with standard cuff	150.00	750.00
9	2	set	Ambu bag set for adult manual resucitator with contour mask, oxygen bag reservoir	2,480.00	4,960.00
			X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X		
			Total>>>>>>		<b>54,180.00</b>
					VVVVVVVVVV

(total amount in words) **FIFTY FOUR THOUSAND ONE HUNDRED EIGHTY 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:   
**EDGAR H. TORAYNO JR.**  
TERRITORY MANAGER  
**IRASETH PHARMA INC.**  
Signature over printed name of Supplier  
OCT 13 2021

Very truly yours,  
  
**ATTY. ARTHUR C. YAP**  
Governor