PURCHASE ORDER

PROVINCIAL HEALTH OFFICE, NEW CAPITOL BUILDING, TAGBILARAN CITY

Agency/Procuring Entity

Supplier			DEXTEL TRADING	D.O. No. :	P.O. # - PHO) - 2021 - 207
Address :		0410, Tamblot Street, Cogon District, Tagbilaran City		Date :	Septembe	er 24, 2021
Telephone No.:				- Mode of	Negotiated Canvass thru	
TIN				Procurement :	Emergency Cases	
Gentlemen/I				1000000	***	
Pleas	se furnish t		he following articles subject to the terms a			
Place of Delivery:		GOVERNOR'S OFFICE, NEW CAPITOL BUILDING, Delivery Term: Please Read Terms & Conditions at the				
Date of Deli		FIVE (5)	TAGBILARAN CITY DAYS AFTER RECEIPT OF NOTICE TO PROCEED THREE (3) MONTHS	back hereof Payment Term: <u>Upo</u>	n Completion of D	elivery
				ATT 15		
Item No.	QTY 8	UNIT	DESCRIPTION OF SU	JPPLIES	UNIT COST	AMOUNT
2	10	pcs.	BP Apparatus with adult cuff, aneroid Thermal Gun	Well-thire	1,498.00	11,984.00
3	8	pcs.	Stethoscope	131100000	1,998.00	19,980.00
4	10	pcs.	Pulse Oximeter		688.00 2,498.00	5,504.00 24,980.00
5	300	boxes	Band Aid (Strips) 100/box		198.00	59,400.00
To Fine to	10		X-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x	(-X-X-X-X-X-X	190.00	03,400.00
	70100		TOTAL	> > >		_ 121,848.00
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(total amour	nt in words)	ONE HUNDRED TWENTY ONE THO	OUSAND EIGHT HUNDRI	D FORTY EIGHT	PESOS ONLY
In case	of failure	to make th	e full delivery within the time specified abo			
of one (1) po	ercent for e	everyday o	f detay shall be imposed.			
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Conforme: (/				Very truly yours,		
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	<u> </u>	EXTEL TE	RADING /	ATTY	ARTHUR C. YA	P
	Signature g	ver printed	Lname of Supplier	-Com/	Governor	_N
	l	IVI U	tname of Supplier 6 Z021	1		1
		Dat	e	Date Approved:	SEP 24	/h21
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Funds Avail	able:		/	1		
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			SOCORIN	Amount :	∠ P 132	,020.00
	P	rovincial T	reasurer		SOURCE CONTRACTOR	

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