



PURCHASE REQUEST
Province of Bohol
GMPH PR # 2-22-152
Date: February 10, 2022

Department: GMPH
Talibon, Bohol
Section:
PR No. _____ Date: _____
SAI No. _____ Date: _____
ObR No. _____ Date: _____

Item No.	Quantity	Unit of Issue	Item Description	Estimated Unit Cost	Estimated Total Cost
1	6	box	Activated Partial Thromboplastin Time (APTT)	15,000.00	90,000.00
2	15	box	Prothrombin Time	14,985.00	224,775.00
3	20	box	HBA1C x 25's Ichromax	16,500.00	330,000.00
4	140	box	Glucometer strips 50's GE	1,900.00	266,000.00
5	2	sets	Electrolyte DH 500 (cal1=5bots & cal2=3bots)	35,200.00	70,400.00
6	1	kit	Albumin FS Diasys	11,440.00	11,440.00
7	1	kit	Alkaline Phosphatase 125mL	1,100.00	1,100.00
				TOTAL....	993,715.00

PROVINCIAL BUDGET OFFICE
PROVINCE OF BOHOL
CONTROL NO. 376 RECD BY 8 DATE: 2/14/22
OFFICER NO. 0582 VALID UNTIL 12/31/22
EXPENSE CODE 50203080 AMOUNT 993,715.00
2021-030 GF SOURCE: _____ DATE: 2/15/22
PETER S.M. RAYOTAL CPA
FBMU

Purpose: For GMPH Laboratory Section Use
Condition: 1. To be delivered at GMPH, Talibon, Bohol
2. To be delivered right after approval of the P.O.
3. Alternative Mode of Procurement - Direct Contracting
BY AUTHORITY OF THE GOVERNOR

Requested by: Cash Availability: _____ Approved by:
Signature Printed Name: MIGUELITO S. JAYONA, MD., FPSGS, FPSCS, MHM. MR. EUSTAQUIO A. SOCORIN, Provincial Treasurer
Designation: Chief of Hospital

PKD-~~2022-040~~
Proc Code: 50203080
DATE: 2/15/22
PROVINCIAL BUDGET OFFICE
AMOUNT: 993,715.00
DCA 016

GMPH-HOPSS-PSS FO-01
REV. 0 October 01, 2017

284.3

amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.

THIS PERMIT SHALL BE VALID UNLESS REVOKED BY THE ATTY. GENERAL OR IF ACTS PROHIBITED BY LAW OR ANY ORDINANCES ARE BEING COMMITTED, OR FOR ANY GOOD REASONS OF GENERAL AND PUBLIC INTEREST IN ACCORDANCE WITH SEC. 10(1) OF R.A. 3857 AND SEC. 45 OF R.A. 7160. FALSIFICATION OF THIS PERMIT SHALL BE SUFFICIENT GROUND FOR ITS IMMEDIATE REVOCATION AND SHALL WARRANT THE CLOSURE OF THE BUSINESS ESTABLISHMENT, WITHOUT PREJUDICE TO THE FILING OF APPROPRIATE CRIMINAL CASES AGAINST ANY OR ALL THE PERPETRATORS OF THE CRIME COMMITTED. THIS PERMIT MUST BE SURRENDERED WITHIN TEN (10) DAYS UPON CESSATION/TERMINATION OF BUSINESS OPERATIONS.