

F-PRB-2021-1293
9/16/21

APPENDIX "F"
Phpr0924-325

PURCHASE REQUEST

Province of Bohol

Department: Teodoro B. Galagar District Hosp	PR No. _____ SAI No. _____ Ob.R. No. _____	Date: 09/13/2021 Date: _____ Date: _____
Section: OR/DR/Housekeeping		

Item No.	Quantity	Unit of Issue	Item Description	Estimated Unit Cost	Estimated Cost
1	1	unit	Airconditioning Unit, Window Type * 2.5 HP; Silent Type; Inverter; w/ Remote Control * Good Quality; Heavy Duty	67,275.00	67,275.00
2	4	units	Airconditioning Unit, Window Type * 2 HP; Silent Type; Inverter; w/ Remote Control * Good Quality; Heavy Duty	58,000.00	232,000.00
3	3	units	Airconditioning Unit, Window Type * 1.5 HP; Silent Type; Manual w/ Timer * Good Quality; Heavy Duty	29,750.00	89,250.00
4	1	unit	Wet/Dry Vacuum Cleaner Heavy Duty * Wet Capacity: 6l; Dry Capacity: 20l * Max Input Power: 1,350watts * Weight: 9kg	15,500.00	15,500.00
5	2	units	Vacuum Cleaner Portable/Handheld, Heavy Duty * Working Voltage: 100-240V * Rated Speed: 29000-31000rpm * Battery Capacity: 2200MAH xxx Charge to Account Code 10705020 xxx	2,790.00	5,580.00
<p>1. Delivery: 15 days after receipt of P.O.</p> <p>2. Deliver to TBGDH, Jagna, Bohol</p> <p>3. Mode of Award: By Lot</p> <p>4. Mode of Procurement: Alternative Mode</p> <p>5. The supplier disclosed the brand and/or manufacturer</p> <p>6. With at least 1yr warranty</p>					
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <p style="text-align: center;">PROVINCIAL BUDGET OFFICE PROVINCE OF BOHOL</p> <p>CONTROL NO. 1417 REC'D BY DATE: 9/15/21</p> <p>OFFICER NO. 2639 VALID UNTIL 12/31/21</p> <p>442203</p> <p>AMOUNT CODE 10705020 AMOUNT 409,605.00</p> <p>1020-040 SOURCE OF CONTROLLER DATE 9/15/21</p> <p style="text-align: center;">BMO</p> </div>					
TOTAL.....				173,315.00	409,605.00

RECEIVED BY: *[Signature]* DATE: 9/13/21
 A/R/P.# 301
 PROVINCIAL PROCUREMENT MANAGEMENT UNIT
 SC# 107 RSC# _____
 DC# 601-64 AS TO APP.
 AMOUNT: \$409,605.00

RECEIVED BY: *[Signature]* DATE: 9/13/21
 A/R/P.# 326
 PROVINCIAL PROCUREMENT MANAGEMENT UNIT
 SC# 253 RSC# _____
 AMOUNT: \$409,605.00

BY AUTHORITY OF THE GOVERNOR:

Purpose: Equipment needed at OR/DR Complex & for Housekeeping Services.		
Condition: A		
Signature Printed Name Designation LINA R. CERO, MD, MPA Chief of Hospital	Requested by: <i>[Signature]</i> Cash Availability: EUSTAQUIO A. SOCORIN Provincial Treasurer	Approved by: <i>[Signature]</i> ATTY. JOSE MARIE N. PORLETE DULY AUTHORIZED REPRESENTATIVE ATTY. ARTHUR C. YAP Provincial Governor

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