

10/27/22



PURCHASE REQUEST
Province of Bohol



① 10/26

Department: PHO- Bohol Provincial Diagnostic & Ambulatory Care Center	PR. No.	Date: 9/20/2022
Section:	OSAI No.	Date:
	OBR No.	Date:

Item No.	Quantity	Unit of Issue	SAI No.	Estimated Unit Cost	Estimated Cost
1	5	SETS	Hematology Reagent (7box diluent+5bot.Leo 1+ 1bot.leo2+3bot.LH lyse+ 2bot.cleaser+1 bot.probe cleanser)	186,000.00	930,000.00
<p> <i>JR/P.R.# 2022-439</i> <i>DATE: 11/7/22</i> <i>PROV. BUDGET OFFICE</i> <i>NO. 2022-256</i> <i>AMOUNT: 930,000.00</i> </p> <div style="border: 2px solid blue; padding: 5px; margin: 10px auto; width: fit-content;"> <p style="text-align: center; margin: 0;"> PROVINCIAL BUDGET OFFICE PROVINCE OF BOHOL CONTROL NO. <i>2012</i> / <i>2850</i> DATE: <i>10/25/22</i> <i>4411/4000-10-39/50203080</i> VALID UNTIL: <i>12/31/2022</i> EXPENSE CODE: <i>2021-0301-6F</i> AMOUNT: <i>1,116,000</i> / <i>930,000</i> FUND SOURCE: <i>GF</i> DATE: <i>10/25/2022</i> PETER CES M. RAYUTALOGPA <i>BPO</i> </p> </div> <p> Time of delivery: 15 days upon receipt of NTP Place of Delivery: PHO- Bohol Provincial Diagnostic & Ambulatory Care Center Mode of procurement: Alternative Mode </p>					
TOTAL					PhP: 930,000.00

Purpose: for the use of Bohol Provincial Diagnostic and Ambulatory Care Center (formerly BMCI)

Requested by:	Cash Availability	Approved by:
Signature: <i>[Signature]</i>	EUSTAQUIO A. SOCORIN Provincial Treasurer	ERICO ARISTOTLE C. AUMENTADO Governor
Printed Name: FRUSERMA MARY A. UY, MD MPA		
Degisnation: Medical Specialist IV		
Recommending Approval:		
Signature: <i>[Signature]</i>		
Printed Name: REYMOSES A. CABAGNOT, MD, MPH		
Degisnation: Provincial Health Officer II		

BY AUTHORITY OF THE GOVERNOR

[Signature]

ASTERIA C. CABERTE

PROVINCIAL ADMINISTRATOR