

PURCHASE REQUEST

Province of Bohol

F-PR-2022-1389

31 9/15

PRD-2022-332

Department: Teodoro B. Galagar District Hosp  
Section: Pharmacy

PR No. \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_ DATE: 10/4/2022  
SAI No. \_\_\_\_\_ DATE: 09/12/2022  
Ob.R. No. \_\_\_\_\_ DATE: \_\_\_\_\_  
NB # \_\_\_\_\_ OS # \_\_\_\_\_ SC # \_\_\_\_\_ NSC # \_\_\_\_\_  
JUNT: \$ 1,016,127.20

Item No.	Quantity	Unit of Issue	Item Description	Estimated Unit Cost	Estimated Cost
1	100	boxes	NSS 1L, 12's	1,074.00	107,400.00
2	100	boxes	LRS 1L, 12's	1,074.00	107,400.00
3	50	amps	A.T.S. 3000 I.U.,	135.00	6,750.00
4	10	boxes	Amoxicillin 500mg cap 100's	240.00	2,400.00
5	10	boxes	Atorvastatin 80mg tablet 100's	2,330.00	23,300.00
6	2,000	vials	Ceftriaxone 1 gram vial	48.00	96,000.00
7	2,000	vials	Cefuroxime 750mg vial	42.00	84,000.00
8	100	amps	Dexamethasone ampule	28.50	2,850.00
9	100	pcs	Enoxaparine 40mg	398.00	39,800.00
10	100	pcs	Enoxaparine 600mg	465.00	46,500.00
11	20	vials	Gentamicin 80mg eye ear drops	110.00	2,200.00
12	50	tab	Levofloxacin 500mg tablet,	22.00	1,100.00
13	20	boxes	Levofloxacin 750mg tablet, 30's	1,320.00	26,400.00
14	10	boxes	Methyldopa 250mg tablet, 100's	1,100.00	11,000.00
15	99	tube	Mupirocin Ointment 5G	98.80	9,781.20
16	50	amps	Norepinephrine 2mg/ml 4ml	550.00	27,500.00
17	500	vials	Omperazole 40mg I.V	80.00	40,000.00
18	20	boxes	Potassium Citrate 10meq tablet, 30's	42.00	840.00
19	2,000	amp.	Ranitidine 50mg injection	12.00	24,000.00
20	20	bots	Salbutamol 2mg syrup 60ml	16.00	320.00
21	50	tube	Silver Sulfadiazine Ointment	125.00	6,250.00
22	1,000	amps	Tramadol 50mg ampule	24.00	24,000.00
23	144	bots	Zinc Syrup 60ml, 55mg/5ml	44.00	6,336.00

PROVINCIAL BUDGET OFFICE  
PROVINCE OF BOHOL  
CONTROL NO. 1573 REC'D BY: \_\_\_\_\_ DATE: 10/11/22  
MARK NO. 21009 VALID UNTIL: 12/31/22  
EXPENSE CODE 50203070 AMOUNT 696,127.20  
SOURCE GP CONTROLLER DATE 9/14/22  
PETER ROSSM. RETUALICPA  
BMO

xxx Charge to Account Code 50203070 xxx

1. Delivery: 15 working days after receipt of P.O.
2. Deliver to TBGDH, Jagna, Bohol
3. Mode of Award: By Lot
4. Mode of Procurement: Alternative Mode
5. The supplier disclosed the brand and/or manufacturer
6. Expiration date: Minimum 2yrs. Expiration period

TOTAL..... 9,378.30 696,127.20

Purpose: Fluids & Medicines needed at Pharmacy for use at WARD/ER/OR/DR/OPD.

Certification: This is to certify that the Medicines purchase are found in the PNDF.

APPROVED AUTHORITY OF THE GOVERNOR  
AZEL A. ABREA Pharmacist

Requested by: LINA R. CERO, MD, MPA  
Chief of Hospital

Cash Availability: EUSTAQUIO A. SOCORIN  
Provincial Treasurer

Approved by: ASTERIA C. CABERTE  
PROVINCIAL ADMINISTRATOR

APPENDIX "F"

M. RETUI... Budget Office  
TWP prepar... six (6)  
Oct Nov  
BUDGET