

PURCHASE REQUEST

BOHOL

Department: Clarín Community Hospital, Clarín, Bohol

Section: Furniture & Fixtures

RECEIVED BY: [Signature] DATE: 4/30/20
 J.R.P.R.# 158
 PROVICIAL PROCUREMENT MANAGEMENT UNIT
 PB# 200-111 PC# 52 RSC#
 AMOUNT ₱ 183,000.00 OK AS TO APP

Item No.	Quantity	Unit of Issue	Item Description	Estimated Unit Cost	Estimated Cost
1.	6	Pcs.	Filing Rack for Medical Records Specifications: 7 tier open metal shelves (10 ft x 13" x 7 ft, 11" distance per tier) Convenient Accessibility from All 4 Sides Attracted Appearance, Concealed Slot Angle Post, Strong, Safe, Positive Connection Rapid Assembly - No Special Tools, No Nut and Bolt Corrosion Resistant Powder Coat Finish	6,000	36,000
2.	6	Pcs.	Filing Rack for Supply Room Specifications: 5 tier open metal shelves (10 ft. x 18" x 6 ft, 18" distance per tier) Convenient Accessibility from All 4 Sides Attracted Appearance, Concealed Slot Angle Post, Strong, Safe, Positive Connection Rapid Assembly - No Special Tools, No Nut and Bolt Corrosion Resistant Powder Coat Finish	6,000	36,000
3.	5	Pcs.	Filing Cabinet with Vault (Steel) Specifications: with 4 drawers 18 1/2 L x 27 D x 52 H in.	15,000	75,000
4.	1	Pcs.	Filing Cabinet (Steel) Specifications: with 5 drawers 18 1/2 L x 27 D x 52 H in.	10,000	10,000
5.	10	Pcs.	Monobloc Chairs Without Arms	600	6,000
6.	2	Pcs.	Steel Cabinet with Glass Sliding Door Specifications: 5 layers 900mm W, 1,850 L, 400mm	10,000	20,000
****Nothing Follows****					

Place of Delivery: Clarín Community Hospital, Clarín, Bohol

Time / Period of Delivery: 5 days upon receipt of approve P.O.

TOTAL 183,000

Purpose: To purchase Furniture & Fixtures for hospital use.

BY AUTHORITY OF THE GOVERNOR

Requested by:

Cash Availability:

Signature:

[Signature]

Approved by: [Signature]
 ATTY. KATHYRINE D. PIQUINTO

Printed Name: NOEL G. MANALO MD, RN, MPA

EUSTAQUIO SOCORIN

ATTY. ARTHUR C. YAP

Designation:

Officer in Charge

Provincial Treasurer

Governor

PROVICIAL BUDGET OFFICE

CONTROL NO 690 REC'D BY [Signature] DATE: 5/8/20

MARK NO. 1443 VALID UNTIL 12-31-20

EXPENSE CODE 10707010 AMOUNT 183,000.00

SOURCE OF FUNDS [Signature] DATE: 5/8/20

PETER ROSS M.R. TOTAL CPA

BMO

