

GOOD-59
004
Purchase Request
D12-22

PURCHASE REQUEST
Provincial Government of Bohol

53
T.M. 0011-183
A/H/A

Department: Office of the Provincial Veterinarian
Location: _____

PR No. _____
SAI No. _____

Date: February 09, 2022
Date: _____

Item No.	Unit	Item Description	Qty.	Unit Cost	Total Cost
14	bot	Amoxicillin trihydrate, 150 mg/ml, suspension, for injection (IM/SC), 100 ml/bot	10	864	8,640.00
15	box	Pyrantel embonate, 125 mg/tab., 100 pcs/box	20	700	14,000.00
16	box	Minerals and Vitamin A+D3 Feed Supplement soluble powder, 200 grams/box	200	110	22,000.00
17	bot	Calcium lactate tablet + Vitamin D3, 100s/bot	800	58	46,400.00
18	bot	Multivitamins A + B1, B2, B12, C,D3, 100 tablet/bot	1176	58	68,208.00
19	kg.	Zoletil 50 (tiletamine as hydrochloride 125mg, Zolazepam as hydrochloride 125mg)	130	1,890	245,700.00
20	bot	Acepromazine maleate, 5 mg/ml, 50 ml/bot	20	780	15,600.00
21	bot	Scalpel blade no. 22, 100 pcs/box	2	3,200	6,400.00
22	box	Surgical gloves, sterile, size 7, 50 pcs/box	6	356	2,136.00
23	box	Surgical gloves, sterile, size 6, 50 pcs/box	5	1,170	5,850.00
24	box	Zylazine, 100 mg / 100 ml/bot	5	4,556	22,780.00
***MUST HAVE ATLEAST ONE (1) YEAR EXPIRATION FROM DELIVERY DATE Charged to Disease Prevention Control and Preparedness Program (899930) Animal /Zoological Supplies Expenses (50203040) Time of Delivery: 30 days upon receipt of NTP Place of Delivery: OPV Tagbilaran Mode of Procurement : Public Bidding					
				SUBTOTAL	457,714.00
				TOTAL	3,890,114.00

RECEIVED BY: *[Signature]*
 PROVINCIAL PROCUREMENT MANAGEMENT UNIT
 A+ 7022-0134
 A+ 7022-0050
 B# 31870
 SC# 114102
 MOUNT: P 31870, 114102
 PROVINCIAL BUDGET OFFICE
 CONTROL NO. 180
 6513
 8000-10-21/50203040
 2021-02012
 VALID UNTIL 12/31/2022
 3,890,114
 2/15/2022
 PETER CESAR P. TALAGA
 B-40

Remarks/Purpose: For livestock disease prevention and control. F or program animals and distribution during Heart Caravan.

Requested by: *[Signature]* **STELLA MARIE D. LAPIZ, DVM**
 Provincial Veterinarian

Cash Availability: *[Signature]* **EUSTAQUIO A. SOCORIN**
 Provincial Treasurer

Signature: _____
 Printed Name: _____
 Designation: _____
 Date: _____

Approved by: **HON. ARTHUR C. YAP**
 Governor
 Page 2 of 2

BY AUTHORITY OF THE GOVERNOR
ATTY. KATHRYN FED. PIQUINTO
 PROVINCIAL ADMINISTRATOR