Revised on: May 24, 2004
Standard Form Title: Purchase Order

# PURCHASE ORDER

CANDIJAY COMMUNITY HOSPITAL, CANDIJAY, BOHOL
Agency/Procuring Entity

PO007-14

| | | | |
|---|---|---|---|
| Supplier : | NEWBORN SCREENING CENTER - CENTRAL VISAYAS | D.O. No. : | P.O. # - PHO - 2022 - 012 |
| Address : | Eversley Childs Sanitarium and General Hospital, Mandaue City, Cebu | Date : | February 21, 2022 |
| Telephone No.: | | Mode of Procurement : | Negotiated Canvass thru Agency to Agency |
| TIN : | | | |

Gentlemen/Mesdames:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

| | | |
|---|---|---|
| Place of Delivery: | CANDIJAY COMMUNITY HOSPITAL, CANDIJAY, BOHOL | Delivery Term: Please read Terms & Conditions at the back hereof |
| Date of Delivery : | TEN (10) DAYS AFTER RECEIPT OF NOTICE TO PROCEED | Payment Term: Upon Completion of Delivery |
| Warranty Period: | THREE (3) MONTHS | |

| Item No. | QTY | UNIT | DESCRIPTION OF SUPPLIES | UNIT COST | AMOUNT |
|---|---|---|---|---|---|
| 1 | 50 | kits | Newborn Screening Collection Kit - Expanded | 1,750.00 | 87,500.00 |
| | | | x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x | | VVVVVVVV |
| (total amount in words) | | | EIGHTY SEVEN THOUSAND FIVE HUNDRED PESOS ONLY | | |

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one (1) percent for everyday of delay shall be imposed.

Conforme:

Gianza L. Robin

NEWBORN SCREENING CENTER - CENTRAL VISAYAS
Signature over printed name of Supplier

FEB 24 2022
Date

Very truly yours,

ATTY. ARTHUR C. YAP
Governor

By Authority of the Governor:

KATHYRIN FE D. PIOQUINTO
Provincial Administrator

Date approved: FEB 21 2022

Funds Available:

Earmarked No. : 3310