



Province of Bohol
PURCHASE REQUEST



60 (94) 4/2

Department: Catigbian District Hospital	PR No.	Date: March 20, 2023
	SAI No.	Date:
Section: Pharmacy Department	ALOBS	Date:
	No.	

Item No.	QTY	Unit of Issue	Item Description	Estimated Unit Cost	Estimated Cost
1	10	box	Acetylcysteine 600mg sachet 10's	458.00	4,580.00
2	5	box	Cefalexin 500mg capsule 100's	415.00	2,075.00
3	1	box	Cefixime 200mg capsule 30's	1080.00	1,080.00
4	10	bottles	Cefuroxime 250mg/5ml susp 120ml 1's	250.00	2,500.00
5	3	box	Cetirizine 10mg tablet 100's	87.00	261.00
6	20	bottles	Cetirizine 5mg/5ml syrup	72.00	1,440.00
7	20	bottles	Clarithromycin 125mg/5ml susp.	220.00	4,400.00
8	200	amps	Clindamycin 600mg/ 4ml ampule	250.00	50,000.00
9	100	amps	Furosemide 10mg/ml, 2ml ampule	26.10	2,610.00
10	150	amps	Hyoscine N-Butylbromide 20mg/ml	46.00	6,900.00
11	10	box	Hydrocortisone 250mg vial 10's	595.00	5,950.00
12	20	bottles	Lactulose 3.3g/5ml, 120ml syrup	174.90	3,498.00
13	3	box	Levofloxacin 500mg tablet 30's	725.10	2,175.30
14	3	box	Losartan 50mg tablet 100's	264.00	792.00
15	1	box	Methyldopa 250mg tablet 100's	1,539.00	1,539.00
16	200	amps	Metoclopramide 10mg/2ml ampule	20.00	4,000.00
17	2	box	Metoprolol 100mg tab 100's	444.00	888.00
18	20	bottles	Metronidazole 125mg/5ml, 60ml susp	28.00	560.00
19	20	tube	Mupirocin 2% 5g ointment	137.00	2,740.00
20	5	box	Omeprazole 40mg capsule 100's	1,450.00	7,250.00
21	1	box	Paracetamol 125mg suppository 24's	604.80	604.80
22	1	box	Paracetamol 250mg suppository 24's	840.00	840.00
23	100	amps	Phytomenadione 10mg/ml ampule	43.00	4,300.00
24	5	box	Piperacillin Na + Tazobactam 4.5g vial 10's	1,965.00	9,825.00
25	300	amps	Ranitidine 50mg/2ml ampule	13.00	3,900.00
26	30	tube	Silver Sulfadiazine cream	174.95	5,248.50
27	50	amps	Tramadol 100mg/2ml amps	26.00	1,300.00
28	1	box	Vitamin B-Complex tablet 100's	165.00	165.00
				TOTAL:	131,421.60

Mode of Procurement: Emergency Purchase
Purchased by: Lot.
Delivery Time: Seven (7) days after receipt of P.O.
Place Delivery: Catigbian District Hospital

Purpose: **For Hospital Pharmacy Use**

Requested by: <i>[Signature]</i>	Cash Availability:	APPROVAL:	
Signature:		<i>[Signature]</i>	
Printed Name: NORANGEL M. CARREON, M.D.	EUSTAQUIO A. SOCORIN	HON. ERICO ARISTOTLE C. AUMENTADO	
Designation: Chief of Hospital I	Provincial Treasurer	Governor	

By Authority:

PROVINCIAL BUDGET OFFICE
PROVINCE OF BOHOL

CONTROL NO. 640 REC'D BY [Signature] DATE 3/23/23

MARK NO. 1209 VALID UNTIL 12/31/23

EXPENSE CODE 50203070 AMOUNT 131,421.60

FUND SOURCE GF CONTROLLED BY [Signature] DATE 3/23/23

[Signature]
ASTERIA C. CABERTE
Provincial Administrator

2023-109 *[Signature]* DATE 4/24/23