

**Republic of the Philippines**  
**Province of Davao del Norte**  
 Government Center, Manilam, Tagum City  
**PURCHASE ORDER**

Supplier : <u>KIMMEL PHARMACY</u>	P.O. No. : <u>2019124318</u>
PhilGEPS Registration No. : _____	Date : <u>December 10, 2019</u>
Address : <u>PIONEER AVE., TAGUM CITY</u>	Mode of Procurement : <u>Shopping</u>
Tel / Fax #: <u>(084) 655-6310</u>	P.R. No. : <u>19104933</u>
Registration Certificate : <u>DTI</u>	

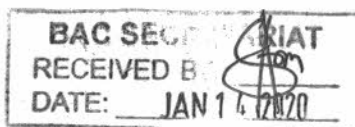
Req. Off.: PEEDO - DN HOSPITAL - KAPALONG ZONE

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

Place of Delivery: <u>DDNH-KZ</u>	Delivery Term: <u>10 Calendar Day/s</u>
Date of Delivery: _____	Payment Term : <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
7	20 BOX	MC LANCE AUTOLANCET, 200'S - <u>DR. CARE BLIND LANCET</u> <u>(AUTO) 200'S</u>	290.00	5,800.00

The award is based on Abstract No. 1120193954  
 dated November 27, 2019 under Quotation No. C20194502  
 opened on November 21, 2019

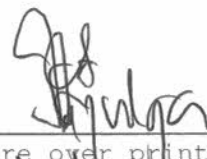


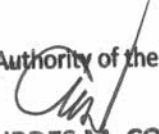
TO PURCHASE LABORATORY SUPPLIES FOR DDNH-KZ, 4TH QUARTER. CHARGE TO SUPPLEMENTAL BUDGET 2019	5,800.00
GRAND TOTAL : P	5,800.00

Grand Total Amount in Words : FIVE THOUSAND EIGHT HUNDRED and 0/100

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

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three(3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme:   
 (Signature over printed name)  
1/16/20  
 (Date)

Very truly yours,  
 By the Authority of the Governor:  
  
**LOURDES M. CONCHA**  
 Administrative Officer V

EDWIN I. JUBAHIB  
 Governor

NOTE: This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.