

**Republic of the Philippines**  
**Province of Davao del Norte**  
 Government Center, Mankilam, Tagum City

**PURCHASE ORDER**

Supplier : <u>AG MEDICAL AND DENTAL TRADING</u>	P.O. No. : <u>2021104274</u>
PhilGEPS Registration No. : <u>2013108429[1013190223]</u>	Date : <u>October 14, 2021</u>
Address : <u>DON RUFINO ALONZO ST. COMASATO CITY 7600</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #:	P.R. No. : <u>21073918</u>
Registration Certificate : <u>DTI</u>	

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

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

Place of Delivery <u>PGSO Warehouse</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
1	4 SET	LARYNGOSCOPE WITH ADULT BLADE WITH AMBU BAG Complete set: Composition: Laryngoscope blade #3 class + fiber optic Laryngoscope blade #4 class + fiber optic Laryngoscope short handle fiber optic Laryngoscoipe case	27,040.00	108,160.00
2	4 SET	LARYNGOSCOPE WITH PEDIA BLADE WITH AMBU BAG Complete set: Composition: Laryngoscope blade MAC # pedia size Class + fiber optic Laryngoscope short handle fiber optic Laryngoscope case	27,040.00	108,160.00
3	4 SET	LARYNGOSCOPE WITH NEONATAL BLADE WITH AMBU BAG Complete set: Classic f.0 > laryngoscope neonate #01 mac Classic f.0 > laryngoscope neonate #2mac	27,040.00	108,160.00

PURCHASE OF MEDICAL EQUIPMENT FOR THE USE OF DDNH-CARMEN ZONE	SUB TOTAL : P	324,480.00
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Grand Total Amount in Words :

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:

GINA  
**SEMOLAVA GINA**  
 \_\_\_\_\_  
 (Signature over printed name)

11/22/2021  
 \_\_\_\_\_  
 (Date)

Very truly yours,

EDWIN I. JUBAHIB  
 Governor

By the Authority of the Governor:

JOSIE JEAN R. RABANOZ  
**ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP**  
 Provincial Administrator

**The winning bidder shall be required to submit a warranty security/certificate during delivery of the item.**

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.

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**Province of Davao del Norte**  
 Government Center, Mankilam, Tagum City

**PURCHASE ORDER**

Supplier : <u>AG MEDICAL AND DENTAL TRADING</u>  PhilGEPS Registration No. : <u>201310842951013190223</u> Address : <u>DON RUFINO ALONZO ST. COTABATO CITY</u>  Tel / Fax # : _____ Registration Certificate : <u>DTI</u>	P.O. No. : <u>2021104274</u>  Date : <u>October 14, 2021</u>  Mode of Procurement : <u>Bidding</u>  P.R. No. : <u>21073918</u>
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Req. Off.: PEEDO - DN HOSPITAL - CARMEN ZONE

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Item No.	Quantity/Unit	Description	Unit Cost	Amount
4	1 UNIT	Laryngoscope short handle fiber optic Laryngoscope case <b>CT-500 OPTHALMIC CHAIR AND STAND UNIT</b>  SPECIFICATION: Maximum size: 1100x800x2100mm Table size:m 890x405mm Table moving angle: 90 degrees Table moving distance: 335mm swing arm angle: +35 degrees swing arm rotation: 60 degrees seat rotationv angle: 45 degrees seat height 150mm(550-700mm) seat load: 250kg seat moving distance 150mm seat reclining angle 120-140 degrees	160,680.00	160,680.00
5	1 UNIT	<b>ELECTRIC OPTHALMIC OPERATING TABLE</b>  SPECS: Strength: 1980mm Wuidth: 550mm	197,600.00	197,600.00

**PURCHASE OF MEDICAL EQUIPMENT FOR THE USE OF DDNH-CARMEN ZONE**

SUB TOTAL : P 358,280.00

Grand Total Amount in Words :

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Conforme:

SEMOLAVA GINA  
 (Signature over printed name)

11/27/2021  
 (Date)

Very truly yours,

EDWIN I. JUBAHIB  
 Governor

By the Authority of the Governor:

ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP  
 Provincial Administrator

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**Province of Davao del Norte**  
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**PURCHASE ORDER**

Supplier : <u>AG MEDICAL AND DENTAL TRADING</u>  PhilGEPS Registration No. : <u>20130842951013190223</u> Address : <u>DON RUFINO ALONZO ST COTABATO CITY</u>  Tel / Fax # : _____ Registration Certificate : <u>DTI</u>	P.O. No. : <u>2021104274</u>  Date : <u>October 14, 2021</u>  Mode of Procurement : <u>Bidding</u>  P.R. No. : <u>21073918</u>
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Req. Off.: PEEDO - DN HOSPITAL - CARMEN ZONE

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Item No.	Quantity/Unit	Description	Unit Cost	Amount
6	1 UNIT	Maximum table top 750mm Minimum table top 550mm+-20mm Electric back lifting>-60 degrees Head plate rising >- 100mm Head plate fall <-30mm Power supply ac220v+-10%, 50hz package 1680x730x780mm  <b>HIGH FREQUENCY ELETROSURGICAL GENERATOR UNIT</b>  SPECS: Stainless steel cover Appluicatio of use General surgery: thoracic surgery, orthopedics, obstetric and Gynecology Urology surgery Material Freq 512KHz max out put 300W application: Human/Vet/Surgery power supply 100-240-C50mA;BIP<60mA	290,000.00	290,000.00

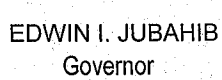
<b>PURCHASE OF MEDICAL EQUIPMENT FOR THE USE OF DDNH-CARMEN ZONE</b>	SUB TOTAL :P <span style="float:right">290,000.00</span>
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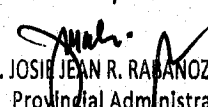
Grand Total Amount in Words :

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Conforme:   
GINA  
 (Signature over printed name)  
11/27/2021  
 (Date)

Very truly yours,  
  
 EDWIN I. JUBAHIB  
 Governor

By the Authority of the Governor:  
  
 ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP  
 Provincial Administrator

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

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Item No.	Quantity/Unit	Description	Unit Cost	Amount
7	2 UNIT	OXYGEN CONCENTRATOR 9F-3/9F-5 Technical data: input power 320 VA (9f-3) input power (400VA)(9F-5) Flow range 0.5-3L/min Oxygen Concentration: 93% + - 3% output pressure 20-50K Pa (9f-5) sound level 46B(A)(9f-3);48dB(A)(9f-5) size 50+ 21*64cm	34,000.00	68,000.00

**ALL BIDDERS SUPPLIER MUST SPECIFY BRAND NAMES AND  
 MODEL NAME AND SPECIFY WARRANTY PERIOD  
 10 CAL. DAYS**

The award is based on Abstract No. 1020214156  
 dated October 04, 2021 under Bid No. B20210484  
 opened on September 30, 2021

**PURCHASE OF MEDICAL EQUIPMENT FOR THE USE OF DDNH-CARMEN  
 ZONE**


SUB TOTAL : P	68,000.00
GRAND TOTAL : P	1,040,760.00

Grand Total Amount in Words : **ONE MILLION FORTY THOUSAND SEVEN HUNDRED SIXTY and 0/100**

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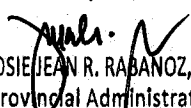
  
SIMPLICIA GINA  
 (Signature over printed name)

11/17/2021  
 (Date)

Very truly yours,

EDWIN I. JUBAHIB  
 Governor

By the Authority of the Governor:

  
 ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP  
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