POYONG

Republic of the Philippines

Province of Davao del Norte

Government Center, Mankilam, Tagum City

PURCHASE ORDER

Supplier : NIPCON DISTRIBUTORS

P.O. No.: 2021083602

PhilGEPS Registration No.: 20040539781460241

Date : August 26, 2021

: G/H BUS. CONVENTION CTR. DIVERSION RD.BUHANGIN

DVO

Tel / Fax #: 69338245316

Mode of Procurement : Bidding

Registration Certificate :

P.R. No.: 21063311

Req. Off.: PEEDO - ADMIN.

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

Place of Delivery DAVNOR PHARMACY

Delivery Term: 10Calendar Day/s

Date of Delivery:

Date of Delivery.		Payment Term : ON ACCOUNT		
Item No.	Quantity/Unit	Description	Unit Cost	Amount
1	2,000 PCS	IV CANNULA G18 W/SAFETY - introcan safety	75.00	150,000.00
2	2,000 PCS	IV CANNULA G20 W/SAFETY - introcan safety	75.00	150,000.00
3	2,000 PCS	IV CANNULA G22 W/SAFETY - introcan safety	75.00	150,000.00
4	2,000 PCS	IV CANNULA G24 W/SAFETY - introcan safety	75.00	150,000.00
5	2,000 PCS	IV CANNULA G26 W/SAFETY - careplus	50.00	100,000.00
6	500 PCS	HEPLOCK - in-stopper	35.00	17,500.00
7	180 PCS	MONOSYN 1.0 W/NEEDLE ROUND - monosyn	500.00	90,000.00
8	180 PCS	MONOSYN 3.0 W/NEEDLE CUTTING - monosyn	500.00	90,000.00
9	180 PCS	NOVOSYN 1.0 W/NEEDLE ROUND - novosyn	350.00	63,000.00
10	180 PCS	NOVOSYN 2.0 W/NEEDLE ROUND - novosyn	350.00	63,000.00
11	500 PCS	SPINAL NEEDLE G25 - spinocan	100.00	50,000.00
12	108 PCS	SILKAM 3.0 STRANDS - silkam	160.00	17,280.00
13	1,944 PCS	NOVOSYN QUICK W/DOUBLE NEEDLE - NOVOSYN QUICK	400.00	777,600.00

FOR THE CONSUMPTION OF THE THREE (3) DDN HOSPITAL (MEDICAL SUPPLIES USED FOR I.V. LINE INSERTION)

GRAND TOTAL : P

Very truly yours,

1,868,380.00

Grand Total Amount in Words: ONE MILLION EIGHT HUNDRED SIXTY EIGHT THOUSAND THREE HUNDRED EIGHTY 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:

VALE

10-11-01

(Signature over printed name)

ENGR. JOSIE JEAN R. RABA

By the Authority of the Governor: EDWIN I. JUBAHIB

Governor

MOZ. MPA, EnP Provincial Administrator

(Date)

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

Republic of the Philippines

Province of Davao del Norte

Government Center, Mankilam, Tagum City

PURCHASE ORDER

Supplier : NIPCON DISTRIBUTORS

PhilGEPS Registration No. : 2004053978146502141

Address : G/H BUS. CONVENTION CTR. DIVERSION RD. BUHANGIN

DVO

Tel / Fax #: 09338245311

Registration Certificate

P.O. No.: 2021083602

Date : August 26, 2021

Mode of Procurement : Bidding

P.R. No.: 21063311

Delivery Term: 10Calendar Day/s

Req. Off.: PEEDO - ADMIN.

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

Place of Delivery DAVNOR PHARMACY

Payment Term : ON ACCOUNT

Date of Delivery: Item No.

Quantity/Unit

Description

Unit Cost

Amount

NOTE:

- 1. ATLEAST TWO (2) YEARS EXPIRATION DATE FROM THE TIME OF DELIVERY.
- 2. NO PARTIAL DELIVERIES.
- 3. TOTAL LOT AWARDING.
- 4. ALL ITEMS MUST BE QUOTED WITH SPECIFIC BRAND AND TECHNICAL SPECIFICATION, FAILURE TO DO SO WILL BE DISQUALIFIED AS A BIDDER.
- 5. SUPPLIER MUST SUBMIT THE COPY OF INTERNATIONAL STANDARD ORGANIZATION (ISO) AND CERTIFICATE OF SOLE DISTRIBUTORSHIP OF THE COMPANY, FAILURE TO COMPLY WILL BE DISQUALIFIED AS A BIDDER.
- 6. THE SUPPLIER SHOULD INFORM THE R.O. INSPECTORY TEAM UPON DELIVERY OF THE ITEMS.

FOR THE CONSUMPTION OF THE THREE (3) DDN HOSPITAL (MEDICAL SUPPLIES USED FOR I.V. LINE INSERTION)

SUB TOTAL

Very truly yours,

GRAND TOTAL : P

1,868,380.00

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Conforme:

VALE

(Signature over printed name)

10-21-21

(Date)

By the Authority of the Governor:

EDWIN I. JUBAHIB

Governor

ENGR. JOSIE JE NR. RABANOZ, MPA, ENP Province Administrator

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

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Republic of the Philippines Province of Davao del Norte

Government Center, Mankilam, Tagum City

PURCHASE ORDER

Supplier : NIPCON DISTRIBUTORS

P.O. No.: 2021083602

Date : August 26, 2021

PhilGEPS Registration No.: 200405397814C50214

Address : G/H BUS. CONVENTION CTR. DIVERSION RD.BUHANGIN

DVO

Tel / Fax #: 0038245316

Registration Certificate :

Mode of Procurement: Bidding

P.R. No.: 21063311

Delivery Term: 10Calendar Day/s

Reg. Off .: PEEDO - ADMIN.

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

Place of Delivery DAVNOR PHARMACY

Date of Delivery: Payment Term : ON ACCOUNT

Item No.

Quantity/Unit

Description

Unit Cost

Amount

ALL ITEMS TO BE CHARGED TO THE THREE (3) DDN HOSPITAL MOOE UNDER MEDICAL, DENTAL AND LABORATORY SUPPLIES ACCOUNT.

*KAPALONG - P765.818.67 *CARMEN - P765.818.67 *IGACOS - P765,818.66 10 CAL. DAYS

The award is based on Abstract No. 0820213374 dated August 16, 2021 under Bid No. B20210386 opened on August 12, 2021

FOR THE CONSUMPTION OF THE THREE (3) DDN HOSPITAL (MEDICAL SUPPLIES USED FOR I.V. LINE INSERTION)

SUB TOTAL

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Conforme:

Very truly yours,

over printed name)

By the Authority of the Governor:

EDWIN I. JUBAHIB Governor

10-71-71

(Date)

ENGR. JOSIE JEAN R. RABINOZ, MPA, ENP

Admir strator

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Republic of the Philippines

Province of Davao del Norte

Government Center, Mankilam, Tagum City

PURCHASE ORDER

Supplier: NIPCON DISTRIBUTORS

P.O. No.: 2021083602

PhilGEPS Registration No. :

Date : August 26, 2021

Address

: G/H BUS. CONVENTION CTR. DIVERSION RD.BUHANGIN

DVO

Mode of Procurement : Bidding

Tel / Fax #:

Registration Certificate

P.R. No. : _21063311

Req. Off.: PEEDO - ADMIN.

Item No. Quantity/Unit

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

Description

Place of Delivery DAVNOR PHARMACY

Delivery Term: 10Calendar Day/s

Date of Delivery: ______Payment Term : ON ACCOUNT

Unit Cost

FOR THE CONSUMPTION OF THE THREE (3) DDN HOSPITAL (MEDICAL SUPPLIES USED FOR I.V. LINE INSERTION)

SUB TOTAL

GRAND TOTAL : P

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Conforme:

By the Authority of the Governor:

EDWIN I. JUBAHIB Governor

printed name) 10-71-71

(Date)

ENGR. JOSIE EAN R. R. BANOZ, MPA, EnP Provincial Administrator

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

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