



PURCHASE ORDER

Supplier : **NIPCON DISTRIBUTORS**

P.O. Number: **2021121140**

Address : **N. ARROYO CORNER, R. CASTILLO ST., AGDAO, DAVAO CITY**



2021101114F4932

PhilGEPS Registration No. : **2004053978146502141**

Tel./Fax No. : **(082) 322-9242**

Registration Certificate : **DTI**

Date : **Dec 21, 2021**

Mode of Procurement : **Bidding**

P.R. No. : **2021101114**

Req. Office : **PEEDO - DavNor Pharmacy**

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

Date of Delivery : _____ Payment Term : **ON ACCOUNT**

Delivery Term: **10 Calendar Days**

Place of Delivery : **DAVNOR PHARMACY**

I.N.	Quantity/Unit	Item	Unit Cost	Amount
1	5,400.00 PCS	IV CANNULA G18 INTROCAN SAFETY	73.00	394,200.00
2	5,400.00 PCS	IV CANNULA G20 INTROCAN SAFETY	73.00	394,200.00
3	5,400.00 PCS	IV CANNULA G22 INTROCAN SAFETY	73.00	394,200.00
4	3,000.00 PCS	IV CANNULA G24 INTROCAN SAFETY	73.00	219,000.00
5	1,500.00 PCS	HEPLOCK W/STOPPER IN-STOPPER	35.00	52,500.00
6	5,000.00 PCS	MACROSET INTRAFIX MACRO	70.00	350,000.00
7	360.00 PCS	MONOSYN 1.0 W/NEEDLE ROUND MONOSYN	500.00	180,000.00
8	180.00 PCS	MONOSYN 2.0 W/NEEDLE ROUND	500.00	90,000.00
Sub-Total :				2,074,100.00

FOR THE CONSUMPTION OF THE THREE (3) DDN HOSPITALS FOR THE 1ST QUARTER OF THE YEAR 2022 (IV CANNULAS AND SUTURES USED FOR SURGERY)

GRAND TOTAL : **₱ 3,257,520.00**

Grand Total Amount in Words : **THREE MILLION TWO HUNDRED FIFTY-SEVEN THOUSAND FIVE HUNDRED TWENTY AND XX / 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 :

RAZEL A. VALE
(Signature over printed name)
2/8/22
(Date)

Very truly yours,

By the Authority of the Governor:

EDWIN I. JUBAHIB
Governor

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

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.

ALEJANDRO R. OMILA JR.



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I.N.	Quantity/Unit	Item	Unit Cost	Amount
		MONOSYN		
9	540.00 PCS	MONOSYN 3.0 W/NEEDLE CUTTING	500.00	270,000.00
		MONOSYN		
10	540.00 PCS	MONOSYN 3.0 W/NEEDLE ROUND	500.00	270,000.00
		MONOSYN		
11	360.00 PCS	NOVOSYN QUICK 2.0 W/NEEDLE ROUND	400.00	144,000.00
		NOVOSYN QUICK		
12	50.00 PCS	OPTILENE MESH 30X30CM	5,000.00	250,000.00
		OPTILENE MESH		
13	72.00 PCS	SILK 1.0 STRANDS	160.00	11,520.00
		SILKAM		
14	180.00 PCS	SILK 1.0 W/NEEDLE ROUND	106.00	19,080.00
		SILKAM		
15	360.00 PCS	SILK 2.0 W/NEEDLE CUTTING	106.00	38,160.00
		SILKAM		
16	360.00 PCS	SILK 3.0 W/NEEDLE CUTTING	106.00	38,160.00
			Sub-Total :	1,040,920.00

FOR THE CONSUMPTION OF THE THREE (3) DDN HOSPITALS FOR THE 1ST QUARTER OF THE YEAR 2022 (IV CANNULAS AND SUTURES USED FOR SURGERY)

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Conforme :

RAZEL A. VALIS
(Signature over printed name)

Very truly yours,

By the Authority of the Governor:

EDWIN I. JUBAHIB
Governor

(Date)

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

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Place of Delivery : **DAVNOR PHARMACY**

I.N.	Quantity/Unit	Item	Unit Cost	Amount
		SILKAM		
17	1,500.00 PCS	SPINAL NEEDLE G25	95.00	142,500.00
		SPINOCAN		

Remarks :

10 CAL. DAYS1. ATLEAST TWO (2) YEARS EXPIRATION DATE FROM THE TIME OF DELIVERY.

2. NO PARTIAL DELIVERIES.

3. ALL ITEMS MUST BE QUOTED WITH SPECIFIC BRAND, FAILURE TO DO SO WILL BE DISQUALIFIED AS A BIDDER.

4. TOTAL LOT AWARDING.

5. SUPPLIER MUST SUBMIT A COPY OF INTERNATIONAL STANDARD ORGANIZATION AND SOLE DISTRIBUTORSHIP CERTIFICATE OF THE COMPANY, FAILURE TO COMPLY WILL BE DISQUALIFIED AS A BIDDER.

6. SUPPLIER MUST INFORM THE R. O. INSPECTORY TEAM UPON DELIVERY OF THE ITEMS.

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

*KAPALONG - P1,440,320.00

*IGACOS - P1,440,320.00

*CARMEN - P1,440,320.00

Sub-Total : 142,500.00

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Conforme :

RAZEL A. VALE
(Signature over printed name)

12/21/21
(Date)

Very truly yours,

By the Authority of the Governor: **EDWIN I. JUBAHIB**
Governor

JOSIE JEAN R. RABANOZ
ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP
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The award is based on Abstract No. **1220211119** dated **December 16, 2021** under Quotation No. **20217997B** opened on **December 02, 2021**

Sub-Total : 0.00

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Jose Jean R. Rabanoz
ENGR. JOSE JEAN R. RABANOZ, MPA, EnP
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