

PURCHASE ORDER

Department of Social Welfare and Development
Cordillera Administrative Office

Annex G-5

Supplier		LOYOSEN'S ENTERPRISE		Purchase Order No.	2021-01-022A
Address		105 KAYANG HILLTOP, BAGUIO CITY		Date	1/27/2021
Gentlemen:				Mode of Procurement	SVP
Please furnish this office the following articles subject to the terms and conditions herein.					
Place of Delivery		DSWD-CAR, #40 North Drive, Baguio City		Delivery Term:	Complete
Date of Delivery		10 WORKING DAYS UPON RECEIPT OF PURCHASE ORDER		Payment Term:	Charge
Stock/Property	Unit	Description	QTY	Unit Cost	Total Cost
PURCHASE AND DELIVERY OF MEDICINES AND OTHER MEDICAL SUPPLIES					
10	box	Diphenhydramine Hydrochloride, 50mg/capsule, 100pcs/box	4	200.00	800.00
14	piece	Hyoscine Butylbromide, 500mg/tablet	300	8.00	2,400.00
15	box	Ibuprofen, 400mg/tablet, 100pcs/box	5	400.00	2,000.00
16	box	Loperamide Hydrochloride, 2mg/capsule, 100pcs/box	5	200.00	1,000.00
17	piece	Meclizine hydrochloride, 25mg, chewable tablet	60	5.00	300.00
18	box	Mefenamic Acid, 500mg/capsule, 100pcs/box	6	200.00	1,200.00
19	box	Metformin Hydrochloride, 500mg/tablet, 90 tablet/box)	6	200.00	1,200.00
21	piece	Mupirucin, 2% x 5mg	8	170.00	1,360.00
22	piece	Omeprazole, 20mg/capsule	55	6.00	330.00
24	box	Phenylephrine HCL Chlorphenamine Maleate Paracetamol, 10mg/2mg/500mg, 100 tablet/box, non-drowsy	4	300.00	1,200.00
25	box	Vitamin B-complex, tablet, 100pcs/box	10	150.00	1,500.00
<i>Note: The delivery of the goods / services is within 10 working days upon receipt of Purchase Order at DSWD Field Office CAR.</i>					
(Amount in words)				TOTAL	13,290.00
Thirteen Thousand Two Hundred Ninety Pesos Only					

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 on the undelivered item/s.

Conforme:

(Signature over Printed Name)	Date
Bank Account Name	Bank Account Number
TIN Number	Date of BIR Registration
*please tick tax type vat non-vat	

LEO L. QUINTILLA
Signature over Printed Name of Authorized Official
OIC Regional Director
Designation

Fund Cluster: <u>01 MRS CURRENT</u>	ORS/ BURS No. : <u>02-101101-2021-01-00403</u>
Funds Available: <u>13,290.00</u>	Date of the ORS/ BURS: <u>JAN 28 2021</u>
WILBOURN B. SACOLONG ACCOUNTANT III	Amount: <u>13,290.00</u>