



**PURCHASE ORDER**

Supplier : <u>TOLET'S PHARMACY</u>	P.O. No. : <u>20-101-082-1011-070</u>
Address : <u>Palanginan, Iba, Zambales</u>	Date : <u>4-23-20</u>
Telephone No. : _____	Mode of _____
TIN : _____	Procurement : _____

Gentlemen:

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

Place of Delivery : <u>LGU - Iba, Zambales</u>	Delivery Term : <u>Free Delivery</u>
Date of Delivery : _____	Payment Term : _____

STOCK NO.	UNIT	DESCRIPTION	QTY.	UNIT COST	AMOUNT
1	gallon	Povidone -Iodine solution	4	1,650.00	6,600.00
2	box	Micropore 10/box	10	350.00	3,500.00
3	roll/pack	Cotton	20	180.00	3,600.00
4	box	N95 mask	60	200.00	12,000.00
5	box	Clear gloves (small)	20	200.00	4,000.00
6	box	clear gloves (med)	25	280.00	7,000.00
7	box	clear gloves (large)	25	280.00	7,000.00
8	box	syringe 3cc	30	280.00	8,400.00
9	box	sterile gloves 50/box	20	300.00	6,000.00
10	box	syringe 0.5 cc	30	750.00	22,500.00
11	set	Cholesterol reagent	2	9,000.00	18,000.00
12	set	Glucose reagent	2	6,800.00	13,600.00
13	set	AST	2	3,500.00	7,000.00
14	set	ALT	2	3,500.00	7,000.00
15	set	Uric Acid	2	6,500.00	13,000.00
16	pc	Gram Stain (medics)	2	2,350.00	4,700.00
17	box	Hepa B screening test kit	5	1,800.00	9,000.00
18	box	Test Tube (red)	6	1,500.00	9,000.00
19	box	Test tube (violet)	6	1,500.00	9,000.00
20	pack	urine and stool container	30	270.00	8,100.00
21	pcs	Alcohol	30	95.00	2,850.00
22	Set	BUN	2	6,500.00	13,000.00

**TOTAL** **194,850.00**

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

Very truly yours,

**HON. JUN RUNDSTEDT C. EBDANE**  
 Authorized Official

Conforme:

**MARLIN A. TOLETE**

Signature over printed name of Supplier

Date