

Republic of the Philippines PROVINCE OF ISABELA

PURCHASE ORDER

Vitaline Health Care Inc

P.O. No.:

Date:

Gentlemen:

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

Place of Delivery: Date of Delivery:

Address Mother Ignacia Ave, South Triangle, QC

Delivery Term: Payment Term:

ı	Item No.	Unit	Quantity	Description	Unit Cost	Amount
ı	1	kits	500	Boditech Chroma Covid-19 Ag	550.00	275,000.00

item No.	Onn	Quantity	Description	One Cost	Amount
1	kits	500	Boditech Chroma Covid-19 Ag	550.00	275,000.00
			BY An OFFICE OFFICE		:
				1	

Total Amount in Words:

Two Hundred Seventy Five Thousand Pesos

275,000.00

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.

Very truly yours,

Conforme:

Vitaline Health Care Inc.

(Signature over printed name)

12-29-21

(Date)

Provincial Governor

In case of negotiated purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished). Approved per Sanggunian Resolution No.: