



Republic of the Philippines
PROVINCE OF ISABELA
PURCHASE ORDER

P.A. NO: 2835
 DATE: 12/17/21
 BY: [Signature]

Supplier: IPSECA Pharmaceutical Incorporated
 Address: #285 Vito Cruz Ext., cor Pasong Tamo, Brgy. La Paz, Makati City

P.O. No.: 21-12-MD205
 Date: December 17, 2021

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

Place of Delivery: PGSO Delivery Term: _____ Charge _____
 Date of Delivery: seven (7) days after receipt of P.O. Payment Term: _____ Check _____

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	unit	1	High Flow Nassal Cannula Machine Flow Range: *10-80 LPM (Adult) *2-25 LPM (Pediatric Mode) Humidity Output: >33 mg/L at 33°C >12 mg/L at 34°C >12 mg L. at 31°C Flow Setting Resolution: *1 LPM (<25 LPM Range) *5 LPM (25-70 LPM Range) Flow Accuracy: *0.5 LPM Oxygen Flow: *Maximum 80 LPM FiO2 Range: *3% Monitoring: *Current Flow Rate *Temperature *Therapy Air FiO2 *Mode of Operation Power Supply: *220vac ± 22v, 50 ± 1Hz Alert Parameters: *Low Oxygen Concentration Alert *High Oxygen Concentration Alert *Low Temp Alert, Circuit Leak Machine Includes the following: *Flowmeter *Stand Trolley *Auto-Filled water chamber & heated tube *Nasal Cannula Oxygen connecting tube *Oxygen Regulator	380,800.00	380,800.00
2	75	pcs	Breathing Circuit and Cannula Set	7,930.00	594,750.00

PROVINCIAL GENERAL
 RECORDED & RECEIVED
 BY Am
 DATE 12-17-21
 SERVICES OFFICE

Total Amount Nine Hundred Seventy Five Thousand Five Hundred Fifty Pesos 00/100 **Php** 975,550.00

In case of fail lure 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: KRISTINE JOY CRUZ
IPSECA Pharmaceutical Incorporated
 Signature over printed Name
12-17-21
 (Date)

[Signature]
RODOLFO T. ALBANO III
 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.: _____

Certified Correct: _____ Date: _____

GENERAL FUND