

P.A. NO: 2168
 DATE: _____
 BY: _____



Republic of the Philippines
PROVINCE OF ISABELA
PURCHASE ORDER

Supplier : **A.CUSIPAG ELECTRICAL AND MEDICAL EQUIP**
 Address : **Tuquegarao, City**

P.O. No. : 23-11 - M0135 A
 Date : November 13, 2023

Gentlemen:

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

Place of Delivery : MANUEL A. ROXAS DISTRICT HOSPITAL Delivery Term : _____
 Date of Delivery : _____ Payment Term : _____

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	JOB	1	Repair, replacement of parts, preventive maintenance and calibration of One (1) unit Cardiac Monitor SCOPE OF WORK: -Check all parameters -For repair the control board -For preventive maintenance -For Calibration -Testing and Commissioning ***** <i>nothing follows</i> *****	71,500.00	71,500.00



(Total Amount in Words) Seventy-one Thousand Five Hundred Pesos Only. **71,500.00**

In case of the 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.

Conforme :

[Signature]

Very truly yours :

[Signature]

A.CUSIPAG ELECTRICAL AND MEDICAL EQUIPMENT REPAIR

RODOLFO T. ALBANO III

(Signature over printed name)

Governor

11-13-23
Date



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 : _____

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GENERAL FUND

[Handwritten mark]