



Republic of the Philippines
PROVINCE OF ISABELA

P.A. NO: 1547
DATE: _____
BY: ca

PURCHASE ORDER

Supplier Mariano Marcos Memorial Hospital & Medical Center
Address Batac, Ilocos Norte

P.O. No. : 23-08-00052
Date : August 31, 2023

Gentlemen:

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

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

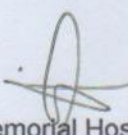
| Item No. | Unit | Quantity | Description | Unit Cost | Amount |
|----------|------|----------|--|-----------|------------|
| 1 | kit | 500 | Expanded New Born Screening Collection Kit | 1,750.00 | 875,000.00 |




Total Amount Eight Hundred Seventy Five Thousand Pesos & 00/100 **Php** 875,000.00

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: 
Mariano Marcos Memorial Hospital & Medical Center
Signature over printed Name
9.8.23
(Date)


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: _____

and