



Republic of the Philippines
PROVINCE OF ISABELA

P.A. NO: 1994
DATE: _____
BY: _____

PURCHASE ORDER

Supplier : Mariano Marcos Memorial Hospital & Medical Center

Address : Batac, Ilocos Norte

P.O. No. : 23-11-DC057

Date : November 22, 2023

Gentlemen:

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

Place of Delivery : PGSO (SMCM) SAN MARINO

Delivery Term : _____

Charge _____

Date of Delivery : Seven (7) days after receipt of P.O.

Payment Term: _____

Check _____

Item No.	Unit	Quantity	Description		Amount
1	kits	100	NBS Filter	1,750.00	175,000.00



Total Amount

One Hundred Seventy Five Thousand Pesos & 00/100

Php 175,000.00

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,

RODOLFO T. ALBANO III
Governor

Conforme:

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

12-1-23

(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: _____