

Visca, Baybay City, Leyte

Supplier: **DMIG PHARM MARKETING**

Address: ZONE 1, TIPOLO, MANDAUE CITY
TIN: 213 100 0200

TIN: 213-100-0000

P.O No: PO-GF-MOOE-2022-11-0822

Date: 11-10-2022

P.R No: GF-2022-09-01331

Mode of Procurement: NP - Small Value Procurement

Gentlemen:

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

Place of Delivery: VSU-Main Campus

No	Unit
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Delivery Term: FOB VSU Baybay

Payment Term: As per cost of items delivered	
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No	Unit	DESCRIPTION	Quantity	Unit Cost	Amount
1	Box of 10's	Epinephrine hydrochloride 1mg/ml/ampule	3	670.00	2,010.00
2	Box of 10's	Hydrocortisone sodium succinate 100mg powder/vial	3	900.00	2,700.00
3	tablet	Methylprednisolone 4mg/tablet	30	10.00	300.00
4	Box of 10's	Paracetamol 125mg/supp	15	220.00	3,300.00
5	Box of 10's	Tetanus toxoid solution 0.5ml/amp box of 10	20	1,100.00	22,000.00
6	piece	Nasal oxygen cannula, (adult)	40	40.00	1,600.00
7	piece	Nebulizing kit reusable (adult)	40	85.00	3,400.00
8	piece	Hospital gauze 40's/40's (36x100 yards- 2 ply)	8	900.00	7,200.00
9	pieces	Elastic bandage 2"	75	23.00	1,725.00
10	pcs	Nasal oxygen cannula, (Pedia); Size: Pedia Tube length: 200cm	75	45.00	3,375.00

Specification:

Specification:

XX			
Purpose: for medical use			
Intended: USHER			

Total Amount in Words: Forty-Seven Thousand Six Hundred Ten Pesos Only	TOTAL: 47,610.00
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Total Amount in Words: **Forty-Seven Thousand Six Hundred Ten Pesos Only**

TOTAL:	47,610.00
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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 delay shall be imposed.

nforme:

Very truly yours,

Supplier's signature Over Printed Name

EDGARDO E. TULIN

President

Date _____

d Cluster:

ds Available:

ORS/BURS No. :

Date of ORS/BURS :

Amount: