

INSPECTION & ACCEPTANCE REPORT

GF-2025-08-01033

No.	UNIT	DESCRIPTION	Quantity		Date Received	Balance	Remarks
			Per P.O	Actual			
1	Box of 30's	Budesonide 250mcg/ml, 2ml, RESI-SAPH	15	15	2025-10-03 #: DR 000139/ CI 01003	0	Completed
Specification: None							
2	Box of 10's	Cefuroxime 750mg/vial, EROXIME	50	50	2025-10-03 #: DR 000139/ CI 01003	0	Completed
Specification: None							
3	Box of 12's	D5 0.9 NaCl, 1L, EUROMED	5	5	2025-10-03 #: DR 000139/ CI 01003	0	Completed
Specification: None							
4	Box of 12's	D5 Water 500ml, EUROMED	10	10	2025-10-03 #: DR 000139/ CI 01003	0	Completed
Specification: None							
5	10pcs per box	Diphenhydramine hydrochloride 50mg/ml, ALLERIGHT	10	10	2025-10-03 #: DR 000139/ CI 01003	0	Completed
Specification: None							
6	Box of 25's	Oral rehydration solution 20.5g sachet, AMBILYTE/DEHYDROSOL	50	50	2025-10-03 #: DR 000139/ CI 01003	0	Completed
Specification: None							

7	Box of 12's	PLR, 1L, EUROMED	5	5	2025-10-03 #: DR 000139/ CI 01003	0	Completed
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Specification:

None

INSPECTION

ACCEPTANCE

Date Inspected:

10/6/25

Date Recieved:

10/6/25

☒ Inspected, verified and found in order
as to quantity and specifications

☒ Complete

☐ Others: _____

☐ Partial

NOREVE JEAN M. AGAD
Inspector

DOREEN B. ALBA
Head, Supply & Property Management