

OP# 1151
8/2/21



PURCHASE REQUEST

Dept./Office: **CN**

Section/End-User: **Joel Rey U. Acob**

Funding Source: **General Fund - MOOE**

PR #: **GF-2021-07-00548**

Date: **07-30-2021**

Category: **Medical & Dental Supplies & Equipment**

Project Title/Code: **College of Nursing Extension Program**

Item #	Item Description	Unit	Qty	Unit Cost	PAR/ICS	Total Cost
1	gloves surgical, sterile, powder free 7.0	box of 50 pairs	2	900.00		1,800.00
2	gloves surgical, sterile, powder free 7.5	box of 50 pairs	3	900.00		2,700.00
3	Non contact infrared thermometer	pieces	3	3,500.00	JOEL REY U. ACOB	10,500.00
	TOTAL					15,000.00

Purpose: To be used during the extension activities

Checked by: PHOEBE LYNN B. CALUNGSOD		Funds Available: MYRNA S. PANCITO	
TWG - Medical & Dental Supplies & Equipment		HEAD, BUDGET OFFICE	
Signature: Printed Name: Designation:	Requested by: JOEL REY U. ACOB END USER	Noted by: JOEL REY U. ACOB UNIT HEAD, PROJECT LEADER	Approved by: EDGARDO E. TULINA PRESIDENT, VSU