

PURCHASE ORDER

ORMOC CITY



ADMIN-BAC Form 8

Rev. 2, Jan. 1, 2024

Reference # : 245434

Supplier **LIFESHIELD PHARMATRADE**
 Address Lot 13 Block 3, NHA, Baras, Palo, Leyte
 Tel. #
 T.I.N. 948-161-958-001

P.O. # : **240266**
 Date : **MAR 04 2024**
 Mode of Procurement : **NEGOTIATED - SVP**
 P.R. # : 240654

Gentlemen :

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

Place of Delivery : **CITY HEALTH OFFICE** Delivery Term **25 CALENDAR DAYS**
 Contract Name : **PROCUREMENT OF DRUGS AND MEDICINES FOR THE CITY HEALTH OFFICE**

Date of Delivery : / /

Payment Term

Item No.	Qty	Unit of Issue	Item Description	Estimated Unit Cost	Estimated Cost
*	<i>Balance Forwarded >>></i>				
1	250.	box	Rifampicin(150mg)+Isoniazid(75mg)+Pyrazinamide(400mg)+Ethambutol (275mg) -FDC-A	1,820.00	455,000.00
2	150.	box	Rifampicin(150mg)+Isoniazid(75mg) - FDCB	2,100.00	315,000.00
			Note:		
			* Expiration date must be atleast 18months and above		
			* Upon delivery of the product CPRs must be attached		
			* If there is a variation in the product it must be FDA approved		
			-x-x-x-x-NOTHING FOLLOWS-x-x-x-x-		
				TOTAL (Cost as Calculated)>>>	770,000.00
Seven Hundred Seventy Thousand Pesos Only				As READ >>>	770,000.00

When the Supplier fails to satisfactory deliver any or all of the Goods and/or perform the Services within the specified delivery schedule, inclusive of duly, inclusive of duly granted time extensions, if any, the supplier shall be liable for damages for the delay and shall pay liquidated damages, not by way of penalty, an amount equal to one tenth (1/10) of one percent (1%) of the cost of the delayed goods scheduled for delivery for every day of delay until such goods are finally delivered and accepted. In case the total sum of liquidated damages reaches ten percent (10%) of the total contract price, the Procuring Entity concerned may rescind the contract and impose appropriate sanctions over and above the liquidated damages to be paid. (GPPB Res. No. 02-2020)

Conforme:

LIFESHIELD PHARMATRADE

(Signature over printed name)

(Date)

4/4/24

Very truly yours,

LUCY TORRES GOMEZ

City Mayor

(Authorized Official)