

Republic of the Philippines
Province of Davao del Norte
Government Center, Mankilam, Tagum City
PURCHASE ORDER

Supplier : <u>ECE MARKETING</u>	P.O. No. : <u>2020062246</u>
PHILIPPINE Registration No. :	Date : <u>June 22, 2020</u>
Address : <u>150 5TH A ST. PH 1. ECOLAND SUBD. DAVAO CITY</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>0998-649-5383</u>	P.R. No. : <u>20011150</u>
Registration Certificate : <u>DTI</u>	
Req. Off. : <u>PEEDO - ADMIN.</u>	

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

Place of Delivery: <u>ON SITE (DDN HOSPITALS - IGACOS, KAPALONG)</u>	Delivery Term: <u>10 Calendar Day/s</u>
Date of Delivery: <u>CARMEN</u>	Payment Term: <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
1	2,000 PCS	ALLOPURINOL 300MG TABLET 100' - elavil/allujen	5.50	11,000.00
2	186 BOTS	ALUMINUM + MAGNESIUM HYDROXIDE SUSP 60ML - medalem/melmag	42.00	7,812.00
7	4,000 PCS	AMLODIPINE 10MG TABLET - cdasy/amlorax	8.20	32,800.00
13	450 VIALS	AMPICILLIN 250MG VIAL - liferzin	24.00	10,800.00
14	200 VIALS	AMPICILLIN 500MG VIAL - liferzin	28.00	5,600.00
17	272 BOTT	ASCORBIC ACID DROPS 15ML - vitcee/apcee/bonelet	48.00	13,056.00
23	1,050 PCS	AZITHROMYCIN 500MG TABLET - azicare/ambimax/zit-od	125.00	131,250.00
24	30 BOTT	AZITHROMYCIN 200MG/5ML SUSPENSION 15ML - hithro/zithromax/zenith	220.00	6,600.00
26	900 PCS	BETAHISTINE HCL 16MG TABLET - dizzez/vertiga	20.00	18,000.00
29	500 PCS	BISACODYL 5MG TABLET - prelax/dii	4.00	2,000.00
38	236 BOTT	CEFALEXIN 100MG/ML DROPS 10ML - diamond lab' exel	56.00	13,216.00

DRUGS AND MEDS FOR THE USE OF THE THREE DAVNOR HOSPITALS	SUB TOTAL : P	262,134.00
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Grand Total Amount in Words :

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.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme: VINCENIM. QUIJE
Sales Representative
ECE Marketing
(Signature over printed name)

very truly yours,
EDWIN I. JUBAHIB
Governor

By the Authority of the Governor:
ENGR. JOSIE JEAN L. RABANDIZ, MPA, EnP
Provincial Administrator

072020
(Date)

The winning bidder shall be required to submit a warranty security/certificate during delivery of the item.

NOTE: This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.

Republic of the Philippines
Province of Davao del Norte
 Government Center, Mankilam, Tagum City
PURCHASE ORDER

Supplier : <u>ECE MARKETING</u> PhilGEPS Registration No. : _____ Address : <u>150 5TH-A ST PH.1 ECOLAND SUBD. DAVAO CITY</u> Tel / Fax #: <u>0986-849-5383</u> Registration Certificate : <u>DTI</u>	P.O. No. : <u>2020082246</u> Date : <u>June 22, 2020</u> Mode of Procurement : <u>Bidding</u> P.R. No. : <u>20011150</u>
Req. Off.: <u>PEEDO - ADMIN.</u>	

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

Place of Delivery: <u>ON SITE (DDN HOSPITALS - IGACOS, KAPALONG,</u> Date of Delivery: <u>CARMEN)</u>	Delivery Term: <u>10 Calendar Day/s</u> Payment Term: <u>ON ACCOUNT</u>
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Item No.	Quantity/Unit	Description	Unit Cost	Amount
40	400 PCS	CEFAZOLIN 1G VIAL - phizolin/cefazin	85.00	34,000.00
41	86 BOTT	CEFIXIME 100MG/5ML SUSP 60ML - celfarm/cefixeph	180.00	15,480.00
43	1,200 VIALS	CEFTAZIDIME 1G VIAL - fortidime/zefcare	120.00	144,000.00
44	18,000 PCS	CEFTRIAZONE 1G + 10ML DILUENT VIAL - sitixon/trioxone	93.75	1,687,500.00
45	200 BOTT	CEFUROXIME 250MG/ML SUSP 50ML - sqceffroxicef	180.00	36,000.00
46	1,050 PCS	CEFUROXIME 500MG TABLET - theoroxime/eroxime/zurenii	42.75	44,887.50
47	22,000 PCS	CEFUROXIME 750MG VIAL - roxicef/zicef	39.25	863,500.00
48	2,500 PCS	CELECOXIB 200MG CAPSULE - xelico/saphelco	10.00	25,000.00
49	300 BOTT	CETIRIZINE 10MG/ML DROPS 10ML - cetimed/reax/allerkid	58.00	17,400.00
50	320 BOTT	CETIRIZINE 1MG/ML SYRUP 80ML - medrizine/reex/allectur	68.00	21,760.00

DRUGS AND MEDS FOR THE USE OF THE THREE DAVNOR HOSPITALS	SUB TOTAL : <u>2,889,627.50</u>
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Grand Total Amount in Words :

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I hereby confirm that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme: VINCEN M. QUJE
 Sales Representative
ECE Marketing
 (Signature over printed name)

Very truly yours,

EDWIN I. JUBAHE
 Governor
 By the Authority of the Governor:
ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP
 Provincial Administrator

(Date)

The winning bidder shall be required to submit a warranty security/certificate during delivery of the item.

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Republic of the Philippines
Province of Davao del Norte
 Government Center, Mankilam, Tagum City
PURCHASE ORDER

Supplier : <u>ECE MARKETING</u> PhilGEPS Registration No. : _____ Address : <u>150 5TH-A ST. PH. 1 ECOLAND SUBD. DAVAO CITY</u> Tel / Fax #: <u>0988-849-5383</u> Registration Certificate : <u>DTI</u>	P.O. No. : <u>2020062246</u> Date : <u>June 22, 2020</u> Mode of Procurement : <u>Bidding</u> P.R. No. : <u>20011150</u>
---	---

Req. Off.: PEEDO - ADMIN.

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

Place of Delivery: <u>ON SITE (DDN HOSPITALS - IGACOS, KAPALONG,</u> Date of Delivery: <u>CARMEN)</u>	Delivery Term: <u>10 Calendar Day/s</u> Payment Term : <u>ON ACCOUNT</u>
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Item No.	Quantity/Unit	Description	Unit Cost	Amount
51	4,400 PCS	CETIRIZINE 10MG TABLET - tracen/catzy 10	4.20	18,480.00
52	20 PCS	CHLORPHENIRAMINE MALEATE AMPULE - xyphen/hyphen	20.00	400.00
53	2,200 PCS	CINNARIZINE 25MG TABLET - zinrex/vorwelt inc	2.00	4,400.00
54	3,700 PCS	CIPROFLOXACIN 500MG TABLET ciprodin/ciprosan/encif-500	8.00	29,600.00
55	586 BOT	CLARITHROMYCIN 125MG/5ML SUSP 50ML - clarithromed/acclithrom	248.00	145,328.00
56	1,590 PCS	CLARITHROMYCIN 500MG TABLET - klarithix/claryl	38.00	60,420.00
57	1,700 PCS	CLINDAMYCIN 300MG CAPSULE - clindagold/acresil/kyleze	12.00	20,400.00
59	1,200 PCS	CLOPIDOGREL 75MG TABLET - saphlopid/clopid/cloplifar	2.00	2,400.00
66	260 PCS	DICLOFENAC SODIUM 25MG/ML AMPULE - diflofid	42.00	10,920.00

DRUGS AND MEDS FOR THE USE OF THE THREE DAVNOR HOSPITALS	SUB TOTAL : P 292,348.00
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Grand Total Amount in Words :

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I hereby confirm that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme: Very truly yours,

VINCENT M. CUNE Sales Representative ECE Marketing _____ (Signature) (Printed name) _____ (Date)	EDWIN I. JUBAHIB Governor By the Authority of the Governor: _____ ENGR. JOSIE JEAN R. RABANOC, MBA, EnP Provincial Administrator
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The winning bidder shall be required to submit a warranty security/certificate during delivery of the item.

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Republic of the Philippines
Province of Davao del Norte
Government Center, Mankilam, Tagum City
PURCHASE ORDER

Supplier : <u>ECE MARKETING</u>	P.O. No. : <u>2020062248</u>
Phileps Registration No. :	Date : <u>June 22, 2020</u>
Address : <u>150 5TH-A ST. PH. 1, ECOLAND SUBD., DAVAO CITY</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>0998-849-5383</u>	P.R. No. : <u>20011150</u>
Registration Certificate : <u>DTI</u>	

Req. Off.: PEEDO - ADMIN.

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

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Date of Delivery: <u>CARMEN</u>	Payment Term: <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
67	200 PCS	DICYCLOVERINE 10MG TABLET diaciel/myrentyl/dli - geseide	2.00	400.00
68	36 BOTT	DICYCLOVERINE HCL 10MG/5ML SYRUP 60ML gasaice/dli/myrentyl - diaciel	32.00	1,152.00
71	36 BOTT	DIPHENHYDRAMINE 12.5MG/5ML SYRUP 60ML - histamox	32.00	1,152.00
72	475 PCS	DIPHENHYDRAMINE 50MG/ML AMPULE - dyphen/alleright/rabaphen	62.00	29,450.00
74	4,000 PCS	DOMPERIDONE 10MG TABLET - apukdon/brudome/motilla	5.00	20,000.00
75	270 BOTT	DOMPERIDONE 1MG/ML SUSPENSION 60ML - domy/accedome/gastroban	130.00	35,100.00
77	700 PCS	DOXYCYCLINE 100MG CAPSULE - new myrex lab/picclin	5.00	3,500.00
84	1,250 AMPS	FUROSEMIDE 10MG/ML, 2ML AMPULE - fusem/rosemide	24.00	30,000.00

DRUGS AND MEDS FOR THE USE OF THE THREE DAVANOR HOSPITALS	SUB TOTAL : P	120,754.00
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Grand Total Amount in Words :

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Conforme: VINCENT M. QUIJE
Sales Representative
ECE Marketing
(Signature over printed name)

Very truly yours,

EDWIN I. JUBAHEB
Governor
By the Authority of the Governor:

ENGR. JOSIE JEAN R. RABANZ, MPA, EnP
Provincial Administrator

(Date)

The winning bidder shall be required to submit a warranty security/certificate during delivery of the item.

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Republic of the Philippines
Province of Davao del Norte
Government Center, Mankilam, Tagum City
PURCHASE ORDER

Supplier : <u>ECE MARKETING</u>	P.O. No. : <u>2020062246</u>
PhilGEPS Registration No. :	Date : <u>June 22, 2020</u>
Address : <u>150 5TH-A ST. PH. 1. ECOLAND SUBD. DAVAO CITY</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>0996-849-5383</u>	P.R. No. : <u>20011150</u>
Registration Certificate : <u>DTI</u>	

Req. Off.: PEEDO - ADMIN.

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Place of Delivery: <u>ON SITE (DDN HOSPITALS - IGACOS, KAPALONG)</u>	Delivery Term: <u>10 Calendar Day/s</u>
Date of Delivery: <u>CARMEN</u>	Payment Term: <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
85	1,000 PCS	FUROSEMIDE 20MG TABLET - DLI	4.00	4,000.00
87	1,500 PCS	GENTAMICIN 40MG/ML 2ML AMPULE - Gentacare/Agentam/gentam	22.00	33,000.00
88	3,100 PCS	GLICLAZIDE 80MG TABLET - zebel/glycinorm	8.00	24,800.00
89	240 PCS	HALOPERIDOL 5MG TABLET - haldol/preidol/zuredel	21.00	5,040.00
91	260 PCS	HYDRALAZINE 20MG/ML, 1ML AMPULE - hypress/zacsin/hydrasol	195.00	50,700.00
103	3,150 PCS	KETOROLAC 30MG/ML, 1ML AMPULE ketoright/ketorobas/actor	68.00	214,200.00
106	196 BOT	LAGUNDI 300MG/5ML SYRUP 60ML - negacof/ofplemed	75.00	14,700.00
107	100 PCS	LEVOFLOXACIN 500MG TABLET - celevo/falmidryl	42.00	4,200.00
109	1,500 PCS	LIDOCAINE + EPINEPHRINE 2% CARPULE - zeyco fd/ new stetic	32.00	48,000.00

DRUGS AND MEDS FOR THE USE OF THE THREE DAVNOR HOSPITALS	SUB TOTAL : P 398,640.00
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Grand Total Amount in Words :

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Conforme: VINCENT M. QUIJE
Sales Representative
ECE Marketing
(Signature over printed name)

Very truly yours,
EDWIN I. JUBAHD
Governor

By the Authority of the Governor
ENGR. JOSIE JEAN R. RABANOS, MPA, EnP
Provincial Administrator

07/20
(Date)

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Republic of the Philippines
Province of Davao del Norte
 Government Center, Mankilan, Tagum City
PURCHASE ORDER

Supplier : <u>ECE MARKETING</u>	P.O. No. : <u>2020062246</u>
PhilGEPS Registration No. :	Date : <u>June 22, 2020</u>
Address : <u>150 5TH-A ST. PH.1.ECOLAND SUBD., DAVAO CITY</u>	Made of Procurement : <u>Bidding</u>
Tel. / Fax #: <u>0998-849-5383</u>	P.R. No. : <u>20011150</u>
Registration Certificate : <u>DTI</u>	

Req. Off.: PEEDO - ADMIN.

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

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Date of Delivery: <u>CARMEN)</u>	Payment Term : <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
110	2,000 PCS	LOPERAMIDE HCl 2MG CAPSULE - motirex/scheele	3.00	6,000.00
111	2,200 PCS	LOSARTAN 50MG TABLET - sartan/ara/angel 50	9.45	20,790.00
114	266 BOT	MANNITOL 20%, 500ML endure medical euromed - renimax/bbraun	285.00	75,810.00
117	13,000 PCS	MEFENAMIC ACID 500MG CAPSULE - Myrefen/fenady/megyfan	5.20	67,600.00
118	2,500 PCS	METFORMIN HCl 500MG TABLET - sucrol/saphormin	3.20	8,000.00
119	1,200 PCS	METHYLDOPA 250MG TABLET - dopamet/doparine	12.00	14,400.00
121	100 PCS	METOCLOPRAMIDE 10MG TABLET - DLI/meclop	4.00	400.00
125	498 BOT	METRONIDAZOLE 125MG/5ML SUSP 60ML - flagex/ambidazol	42.00	20,916.00
126	250 PCS	METRONIDAZOLE 5MG/ML, 100ML VIAL antizoal/erzol/nozol/axagyl	32.00	8,000.00

DRUGS AND MEDS FOR THE USE OF THE THREE DAVNOR HOSPITALS	SUB TOTAL : P	221,916.00
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Grand Total Amount in Words :

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I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforms: VINCENT M. OLIVE
 Sales Representative
ECE Marketing
 (Signature over printed name)
072020
 (Date)

Very truly yours,
EDWIN I. JUBANIB
 Governor
 By the Authority of the Governor:
ENGR. JOSIE JEAN R. RABANDE, MPA, EnP
 Provincial Administrator

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Republic of the Philippines
Province of Davao del Norte
Government Center, Mankilam, Tagum City
PURCHASE ORDER

Supplier : <u>ECE MARKETING</u>	P.O. No. : <u>2020062246</u>
PhilGEPS Registration No. :	Date : <u>June 22, 2020</u>
Address : <u>150 5TH-A ST. PH. 1. ECOLAND SUBD., DAVAO CITY</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>0995-849-5383</u>	P.R. No. : <u>20011150</u>
Registration Certificate : <u>DTI</u>	

Req. Off. : FEEDO - ADMIN.

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Place of Delivery: <u>ON SITE (DDN HOSPITALS - IGACOS, KAPALONG,</u>	Delivery Term: <u>10 Calendar Day/s</u>
Date of Delivery: <u>CARMEN)</u>	Payment Term: <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
128	1,300 PCS	MONTELUKAST 10MG TABLET - lukaszt/urohex	12.00	15,800.00
129	195 PCS	MUPIROCIN 2% OINTMENT 5G - mupiderm/mupirex/mupiban	162.00	31,590.00
132	1,800 PCS	OMEPRAZOLE 20MG CAPSULE - omabloc/zceec	8.00	14,400.00
133	1,900 PCS	OMEPRAZOLE 40MG CAPSULE - xcpirazole/omep 40	12.00	22,800.00
135	950 PCS	ORAL REHYDRATION SALT 5.125G SACHET - dehydrosol	6.00	5,700.00
138	1,250 PCS	OXYTOCIN 10IU/ML, 1ML AMPULE gynelocin/estimol/oxynox - pcpicin	30.00	37,500.00
138	788 BOT	PARACETAMOL 100MG/ML DROPS 15ML - napran/myremo/milgesic	48.00	37,824.00
140	500 BOT	PARACETAMOL 250MG/5ML SUSP 60ML - napran/myremo/milgesic	58.00	34,104.00
141	650 AMP	PARACETAMOL 150MG/ML, 2ML AMPULE - slncmol/amcetam	18.00	11,700.00

DRUGS AND MEDS FOR THE USE OF THE THREE DAVANOR HOSPITALS	SUB TOTAL : P	211,210.00
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Grand Total Amount in Words :

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Conforme:

VINCENT M. QUIJE
Sales Representative
ECE Marketing
(Signature of the bidder name)

Very truly yours,

EDWIN I. JUBAHIB
Governor

By the Authority of the Governor:

ENGR. JOSIE JEAN R. RABANOS, MPA, EnP
Provincial Administrator

(Date)

The winning bidder shall be required to submit a warranty security/certificate during delivery of the item.

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PhilGEPS Registration No. :	Date : <u>June 22, 2020</u>
Address : <u>150 5TH-A ST. PH. 1, ECOLAND SUBD. DAVAO CITY</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>0998-849-5383</u>	P.R. No. : <u>20011150</u>
Registration Certificate : <u>ETI</u>	
Req. Off.: <u>PEEDO - ADMIN.</u>	

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

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Date of Delivery: <u>CARMEN</u>	Payment Term: <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
149	700 PCS	RANITIDINE 150MG TABLET - raniteiv/zidezim	5.00	3,500.00
150	4,800 PCS	RANITIDINE 25MG/ML, 2ML AMPULE - raniteiv/raniphil/ranitac	21.00	100,800.00
151	206 BOT	SALBUTAMOL 2MG/5ML SYRUP 60ML - ventrex/butamol	32.00	6,592.00
153	1,000 PCS	SAMBONG 500MG TABLET - urisam/renaleaf	7.80	7,800.00
158	400 PCS	SIMVASTATIN 20MG TABLET - philsta/saphvas/lipidrex	3.60	1,440.00
161	1,165 PCS	TRAMADOL 50MG/ML, 2ML AMPULE - tramido/ambidol	48.00	55,920.00
162	600 PCS	TRAMADOL 50MG CAPSULE - saphtram/tralofam/e-dol	4.00	2,400.00
164	1,200 PCS	TRANEXAMIC ACID 500MG CAPSULE hemostap/vonwelt inc - haemorex	12.00	14,400.00
169	234 BOT	ZINC SULFATE 27.5MG/ML DROPS 15ML - enerzinc	65.00	15,210.00

DRUGS AND MEDS FOR THE USE OF THE THREE DAVNOR HOSPITALS	SUB TOTAL	208,062.00
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Grand Total Amount in Words :

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Conforme:

Very truly yours,

VINCENT M. QUIJE
Sales Representative
(Signature of registered name)

EDWIN I. JUBAHIB
Governor

By the Authority of the Governor:

ENGR. JOSIE JEAN R. RABANOS, MPA, EnP
Provincial Administrator

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Tel / Fax #: <u>0998-849-5383</u>	P.R. No. : <u>20011150</u>
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Date of Delivery: <u>CARMEN</u>	Payment Term: <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
170	364 BOT	ZINC SULFATE 55MG/5ML SYRUP 60ML - enerzinc	58.00	20,532.00
171	7 BOT	ADINOSINE 3MG/ML - adesan	1,220.00	8,540.00
178	10 TUBE	ERYTHROMYCIN EYE OINTMENT 0.5%, 5G - eryzin/ery-v	225.00	2,250.00
179	800 PCS	GLICLAZIDE 80MG TABLET - zebet	8.00	6,400.00
180	100 PCS	GLICLAZIDE 30MG TAB - gazid	6.00	600.00
183	400 PCS	ISOSORBIDE DINITRATE 10MG TABLET - trindil/andicspec	10.00	4,000.00
187	500 PCS	MULTI-VITAMINS W/ IRON - ferromax/hanizyn	5.50	2,750.00
191	80 VIAL	PIPERACILLIN + TAZOBACTAM 4.5G VIAL - racelax/piptasea	325.00	26,000.00
192	200 PCS	PREDNISONE 10MG TAB 100'S - vonwelt inc, pred 10	4.00	800.00
194	100 PCS	SIMVASTATIN 40MG - diastatin/zimvast	7.00	700.00

DRUGS AND MEDS FOR THE USE OF THE THREE DAVNOR HOSPITALS	SUB TOTAL : P	72,572.00
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Grand Total Amount in Words :

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.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme: _____

VINCENT M. QUINE
 Sales Representative
 ECE Marketing
 (Signature) _____
 (Date) _____

Very truly yours,
EDWIN I. JUBAHD
 Governor
 By the Authority of the Governor:
ENGR. JOSHE JEAN E. RABANDIZ, MPA, EnP
 Provincial Administrator

The winning bidder shall be required to submit a warranty security/certificate during delivery of the item.

NOTE : This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.

Republic of the Philippines
Province of Davao del Norte
Government Center, Mankilam, Tagum City
PURCHASE ORDER

Supplier : <u>ECE MARKETING</u>	P.O. No. : <u>2020062246</u>
PhilGEPS Registration No. :	Date : <u>June 22, 2020</u>
Address : <u>150 5TH-A ST. PH 1, ECOLAND SUBD., DAVAO CITY</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>0993-849-5333</u>	P.R. No. : <u>20011150</u>
Registration Certificate : <u>DTI</u>	
Req. Off. : <u>PEEDO - ADMIN.</u>	

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

Place of Delivery: <u>ON SITE (DDN HOSPITALS - IGACOS, KAPALONG,</u>	Delivery Term: <u>10 Calendar Day/s</u>
Date of Delivery: <u>CARMEN)</u>	Payment Term : <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
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196	10 PCS	VOLUVEN 500ML - volulen	1,080.00	10,800.00
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NOTE:

ALL ITEMS TO BE CHARGED TO THE THREE (3) DDN HOSPITAL MOOE UNDER THE DRUGS AND MEDS ACCOUNT

*KAPALONG ZONE- P 3,767,022.38

*IGACOS ZONE- P 3,767,022.38

*CARMEN ZONE- P 3,767,022.38

The award is based on Abstract No. 0420201481
dated April 15, 2020 under Bid No. B20200106
opened on April 14, 2020

DRUGS AND MEDS FOR THE USE OF THE THREE DAVNOR HOSPITALS	SUB TOTAL : P 10,800.00
	GRAND TOTAL : P 4,577,971.50

Grand Total Amount in Words : **FOUR MILLION SIX HUNDRED SEVENTY SEVEN THOUSAND NINE HUNDRED SEVENTY ONE and 50/100**

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.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Confirms: Very truly yours,

<p>VINCENT M. DUJE Sales Representative (Signature: <u>ECE Marketing</u>, name)</p> <p>_____ (Date)</p>	<p>EDWIN I. JUBAHIB Governor</p> <p>By the Authority of the Governor:</p> <p><u>Josie J. R. R. R.</u> ENGR. JOSIE JEN R. RABANDZ, MPA, EnP Provincial Administrator</p>
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The winning bidder shall be required to submit a warranty security/certificate during delivery of the item.

NOTE: This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.