

PURCHASE ORDER

RECEIVED BY: [Signature]DATE: 5/24/17

DR. JOSE FABELLA MEMORIAL HOSPITAL

RECEIVED BY: [Signature]DATE: 5/24/17TIME: 4:43pm

Agency

Supplier: **ONICARE PHARMA TRADING & GENERAL**Address: **MERCHANDISE Bk 8 Lot 36 Villa**

Consolacion Subd., San Jose (Pob.) Antipolo

TIN : City Tel.No. 586-57-15

P.O. no. : **2017-05-0407**Date : **May 23, 2017**Mode of Procurement: **Competitive/Public Bidding**

Accounting Office

RECEIVED

Date: 5/30 TIME: 11:30

Gentlemen:

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

Place of Delivery: **Materials & Management Department**

Date of Delivery:

Delivery Term: **Seven (7) working days**

Payment Term:

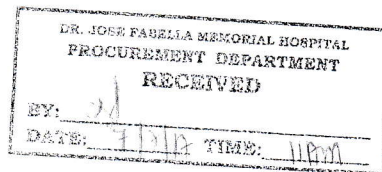
Stock No.	Unit	Description	Quantity	Unit Cost	Amount
	capsule	Nifedipine, oral, 10mg capsule (Calcigard 10) (Mfd. By: Shandong Yuwang Pharmaceutical Co., Ltd. - China)	2,000	₱ 3.40	₱ 6,800.00
<p>Price list for Drugs and Medicines. Public Bidding dated December 22, 2016.</p> <p>Page 9 No. 93</p> <p>Chargeable against HEMS sub-allotted funds (Code III)</p>					

Dr. Jose Fabella Memorial Hospital
FINANCE SERVICE

DATE/TIME:

74 10:15

DATE/TIME:



(Total Amount in Words) SIX THOUSAND EIGHT HUNDRED PESOS ONLY**

In case of failure to make 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.

Date P.O. Received: _____

Date of Delivery: _____

Time of delivery: _____

Signature: _____

Very truly yours,

Conforme:

Signature over Printed Name of Supplier

Date

[Signature]
ESMERALDO T. ILEM, M.D.
Medical Center Chief II
Authorized Official

Funds Available:

[Signature] 6/30
MERCILITA D. FORTIER
Accountant IV

OR/BUR No. **02-102401-2017-05-0349 NA**Amount : **₱ 6,800.00**