

**PURCHASE ORDER**  
PROVINCIAL GOVERNMENT OF CAMARINES NORTE

Supplier : **ZYRE PHARMACEUTICALS CORPORATION** P.O. No. : **23030907**  
 Address : ZPC- Building - Bano Date : **06 | 05 | 2023**  
Legazpi City  
 Telephone No. : (052) 742-2844 / 0917-148-0687 / 0933-816-8646 Mode of Procurement : **SHOPPING**  
 TIN : 005 769 913 000

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

Place of Delivery : **CNPH** Delivery Term : **7CD**  
 Date of Delivery : **06 | 13 | 23** Payment Term : **FULL**

| Item No. | Quantity | Unit Issue | ITEM DESCRIPTION                                    | Amount    |            |
|----------|----------|------------|-----------------------------------------------------|-----------|------------|
|          |          |            |                                                     | Unit Cost | Total Cost |
| 1        | 35       | bx         | Disposable Syringe 1cc with needle, 100's (Insulin) | 2,500.00  | 87,500.00  |
| 2        | 110      | bx         | Disposable Syringe 1cc with needle, 100's           | 920.00    | 101,200.00 |
| 3        | 240      | bx         | Disposable Syringe 3cc with needle, 100's           | 950.00    | 228,000.00 |
| 4        | 230      | bx         | Disposable Syringe 5cc with needle, 100's           | 970.00    | 223,100.00 |
| 5        | 168      | bx         | Disposable Syringe 10cc with needle, 100's          | 1,650.00  | 277,200.00 |
| 6        | 10       | bx         | Disposable Needle #18, 100's                        | 1,500.00  | 15,000.00  |
| 7        | 10       | bx         | Disposable Needle #26, 100's                        | 1,500.00  | 15,000.00  |

*for Nursing Service use*

Total amount in words: **Nine Hundred Forty Seven Thousand Pesos Only** **947,000.00**

In case of failure to deliver within the time specified above, penalty of one-tenth (1/10) of one (1) percent of every day of delay shall be imposed.

Conforme:  
  
**REYNER B. CELLS**  
 Signature over printed name of Supplier  
06 | 06 | 23  
 Date

Very truly yours,  
  
**RICARTE B. PADILLA**  
 Governor