

PURCHASE ORDER
PROVINCIAL GOVERNMENT OF CAMARINES NORTE

Supplier : ACT CARE PHARMACY P.O. No. : 23041115
 Address : Moreno St. Brgy. IV Pob. Daet, Camarines Norte Date : 06/04/23
 Telephone No. : _____ Mode of Procurement : **SHOPPING**
 TIN : 279-010-861-000

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

Place of Delivery: GO Delivery Term : 7CD
 Date of Delivery : 06/14/23 Payment Term: FULL

Item No.	Quantity	Unit Issue	ITEM DESCRIPTION	Amount	
				Unit Cost	Total Cost
1	30	pc	Wheel Chair (Adult)	5,200.00	156,000.00
2	5	pair	Crutches	1,200.00	6,000.00
3	5	pc	Walker	1,800.00	9,000.00
4	25	pc	BP Apparatus	900.00	22,500.00
5	50	pc	Thermometer (clinical)	100.00	5,000.00
6	15	pc	Weighing Scale (baby)	1,950.00	29,250.00
7	10	pc	Weighing Scale (adult)	650.00	6,500.00

for Donation for various recipient of Brgy. NGO's & Others

Total amount in words: **Two Hundred Thirty Four Thousand Two Hundred Fifty Pesos Only** 234,250.00

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:


ANGELINE C. TUI, RPh
 Signature over printed name of Supplier
06/07/23
 Date

Very truly yours,


RICARTE R. PADILLA
 Governor