

PURCHASE ORDER

PROVINCIAL GOVERNMENT OF CAMARINES NORTE

Supplier : **CRONIX PHARMA AND MEDICAL SUPPLIES TRADING** P.O. No. : **23082169**
 Address : **2410 Padillo Cpd. PSA Purok Masaya Brgy. Gulang Gulang** Date : **10-04-23**
Lucena City
 Telephone No. : **09171592723/09236148842** Mode of Procurement : **SHOPPING**
 TIN : **244-016-383-000**

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


Place of Delivery : **CNPH** Delivery Term : **740**
 Date of Delivery : **10-12-23** Payment Term: **FULL**

Item No.	Quantity	Unit Issue	ITEM DESCRIPTION	Amount	
				Unit Cost	Total Cost
1	2,000	pc	Microdrip, Pedia	49.00	98,000.00
2	500	pc	Soluset	190.00	95,000.00
3	1,000	pc	Blood transfusion set	60.00	60,000.00

for Pharmacy use

Total amount in words: **Two Hundred Fifty Three Thousand Pesos Only** **253,000.00**

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:

ANGELO V. ZALETA
 Signature over printed name of Supplier
10-05-23
 Date

Very truly yours,

RICARTE R. PADILLA
 Governor