

PURCHASE ORDER
 PROVINCIAL GOVERNMENT OF CAMARINES NORTE

Supplier	: ZYRE PHARMACEUTICALS CORPORATION	P.O. No.	: 23082197
Address	: ZPC- Building - Bano Legazpi City	Date	: 11-16-23
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	: LDH	Delivery Term	: 700
Date of Delivery	: 11-24-23	Payment Term	: FULL

Item No.	Quantity	Unit Issue	ITEM DESCRIPTION	Amount	
				Unit Cost	Total Cost
1	167	vial	Anti - Rabies Vaccine Active (PVRV)	1,593.00	266,031.00
<i>for Hospital use</i>					

Total amount in words: **Two Hundred Sixty Six Thousand Thirty One Pesos Only** 266,031.00

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.

Very truly yours,

RICARTE R. PADILLA
 Governor

Conforme:

REYNER B. CELLS

Signature over printed name of Supplier

11-17-23

Date