



Republic of the Philippines
PROVINCE OF ISABELA
PURCHASE ORDER

P.A. NO.: 1168
DATE: 5-25-21
BY: [Signature]

P.O. No.: 21-05-10044
Date: May 14, 2021

AMKA TRADING

Address: A.B. Fernandez Avenue, Dagupan City, Pangasinan

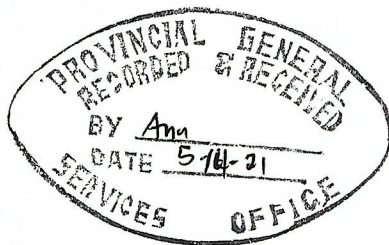
Gentlemen:

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

Place of Delivery: PC-S.O. Delivery Term: CASH

Date of Delivery: Seven (7) days after receipt of P.O. Payment Term: CHECK

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	bxs	5	Syphilis, SD Bioline	8,500.00	42,500.00
2	bxs	5	HbsAg, SD Bioline	4,000.00	20,000.00
3	bxs	2	Pregnancy Test	1,875.00	3,750.00
4	bxs	3	Dymind Diluent, DF50, 20 liters	35,000.00	105,000.00
5	btls	2	Dymind Lyc 1, 200 ml	25,000.00	50,000.00
6	btls	2	Dymind Lyc 2, 500 ml	25,000.00	50,000.00
7	btls	2	Dymind Cleanser 50 ml	15,000.00	30,000.00
8	box	1	Medical Sol Pack Expand	45,000.00	45,000.00
9	set	1	Furuno Cholesterol	26,000.00	26,000.00
10	set	1	Furuno Triglycerides	30,000.00	30,000.00
11	bxs	2	Sensolite Strips	2,800.00	5,600.00
Total Estimated Cost					407,850.00



GENERAL FUND

(Total Amount in Words) Four Hundred Seven Thousand Eight Hundred Fifty Pesos Only P **407,850.00**

In case of failure to make the 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.

Very truly yours,

[Signature]
HON. RODOLFO T. ALBANO III
Provincial Governor

Conforme:

[Signature]
(Signature over printed name)

5-14-21
(Date)

In case of negotiated purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished).

Approved per Sanggunian Resolution No.: _____

Certified Correct: _____

Date: _____