18	CLOPA
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Republic of the Philippines PROVINCE OF ISABELA

P.A. NO: _	1444		
DATE:	6-18 7		
3Y:	8_		

		(8)	PURCHASE ORDER		
Supplier: Mariano Marcos Memorial Hospital & Medical Center			P.O. No.: 21-04-0032 Date: Una 13, 4-24		
Address : Batac, llocos Norte					
Gentleme Ple		sh this office t	ne following articles subject to the terms and conditions	contained herein:	
Place of De		PGSO	Delivery	The state of the s	narge
Date of Delivery : Seven (7) days after receipt of P.O. Payment					
Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	kit	100	Expanded NBS Collection Kit (Filter Card Lancet, Transmittal Form, NBS Pink Brochure)	1,750.00	175,000.0
			BY AM SPATE 6-17-21 OFFICE		
Total An	nount		One Hundred Seventy Five Thousand		Php 175,000.00
In o	case of failu	ire to make the	full delivery within the time specified above, a penalty of one imposed.	tenth (1/10) of one	
			Very truly	yours,	Into
Conforme			cas Mem. Hosp. & Med. Center	Provincial C	Car.

In case of negotiated purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished). FUND
Approved per Sanggunian Resolution No.:

Certified Correct:

Date:

7- H - 11 (Date)