

## RONCEGE

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## PURCHASE ORDER

Supplier	MIDWA	Y DRUG	AND MEDICAL SUPPLIES			
Address		City of Ila	igan, Province of Isabela		<u>Date</u>	5-19-2
Gentler	nen:				ret.	
	Please t	furnish thi	s office the following articles subject to the	terms and	CONQUIOUS CON	D V
Place of Delivery: P.G.S.O.				Delivery T		P.O.
Date of	Deliver	AND THE SHAPE OF THE PARTY OF T	n(7) days upon receipt of P.O.	Payment 1		Charge Amount
Item No.	Unit	Quantity	Description	CONTRACTOR OF THE PARTY OF THE	Unit Cost	Anoun .
- possession	sets	60	PPE, Surgical gloves, face shield, face mask, cover, OR cap with Vit. C tab w/zinc	shoe	1,750.00	Php105,000.00
			RYAN 5-19-21  PLO GANTS			
(Total Ar	nount i	n Words) of failure to	ONE HUNDRED FIVE THOUSAND PESOS ONLY  make the full delivery within the time specified	l above, a pe	nalty of one-tent	PHP 105,000.00 h (1/10) of one
percent	for ever	y day of de	lay shall be imposed.	Very truly		
Conform	me:	MIDWA (Signat	Y DRUG AND MEDICAL SUPPLIES ure over printed name)  3-20-21 (Date)	-	Provincial	ALBANO III
Approve	d per Sar	iggunian Res	pursuant to Section 369 (a) of RA 7160, this portion n		and complete man confidence and conf	
Certifie	ed Corre	ect:		Date		
****Sys	tem Cor	ntrol No.	5195	W		