

**PURCHASE ORDER**

Supplier: <b>CONSULTA FARMACIA DRUGSTORE CHAIN, INC.</b>	P.O. No. <b>040-19</b>
Address: Unit 1002, 88 Corporate Center, Sedeno cor. Valero St. Salcedo Village, Makati City	Date: <b>July 9, 2019</b>
	Mode of Procurement : <b>AMP-SVP</b>

Gentlemen:

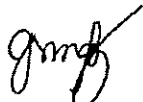
Please furnish this office the following articles subject to the items and conditions contained herein:

Place of Delivery : **PICC - HRMDD**  
Date of Delivery : **Fifteen (15) calendar days after the receipt of Notice to Proceed**  
Payment Term: **Two (2) weeks after full delivery & final acceptance of HRMDD**

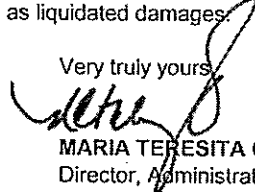
Item No.	Unit	Description	Qty	Unit Cost	Total Cost
<b>Lot I - Supply &amp; Delivery of Various Medicines</b>					
1	pcs	Aluminum hydroxide, magnesium hydrogen, Simeicone, Reformulated (Kremil-S)	180	P 6.00	P 1,080.00
2	pcs	Betahistine Dihydrochloride, 8mg (Serc)	28	61.00	1,708.00
3	pcs	Cetirizine Dihydrochloride, 10mg (Virlix)	353	27.50	9,707.50
4	pcs	Clonidine Hydrochloride, 75mcg (Catapres)	40	30.25	1,210.00
5	pcs	Dequalinium Chloride Lozenges (Dequadine)	236	5.00	1,180.00
6	pcs	Dextromethorphan Hr + Phenylephrine HCL + Paracetamol (Tuseran) Expiry Date: 09/2020	184	9.50	1,748.00
7	pcs	Hydroxyzine, 10mg (Generic Brand: Sedazine) Expiry Date: 10/2020	228	10.50	2,394.00
8	pcs	Hyoscine N-butylbromine, 10mg (Buscopan)	316	24.50	7,742.00
9	pcs	Loperamide, 2mg (Diatabs)	282	7.50	2,115.00
10	pcs	Mefenamic Acid, 500mg (Dolfenal)	444	28.25	12,543.00
11	pcs	Ambroxol, 75mg (Mucosolvan)	40	42.00	1,680.00
12	pcs	Paracetamol, 500mg (Biogesic)	684	3.50	2,394.00
13	pcs	Phenylephrine HCl + Paracetamol (Neozep No Drowse)	407	5.75	2,340.25
14	packs	Ipratropium/Albuterol, 2.5mg (Combivent) Expiry Date: 05/2020	9	354.00	3,186.00

(Sub-Total Amount in Words) **FIFTY ONE THOUSAND TWENTY SEVEN PESOS AND SEVENTY FIVE CENTAVOS** P **51,027.75**

In case of failure to make the full delivery within time specified above, a penalty of one-tenth (1/10) of one percent (1%) of the cost of the undelivered items for every day of delay, as liquidated damages.

Conforme:   
**GRACE R. MARTINEZ**  
(Signature Over Printed Name of Supplier)

JULY 16, 2019  
Date

Very truly yours  
  
**MARIA TERESITA C. SALCEDO**  
Director, Administrative Dept.

Funds Available: <b>PCFB - Hospitalization</b> <b>751,027.75</b>	P. R. No: <b>HR-19-008</b>
<b>SUSAN M. GALANG</b> Cost Controller / Budget Officer	Amount: <b>P 68,009.40</b>