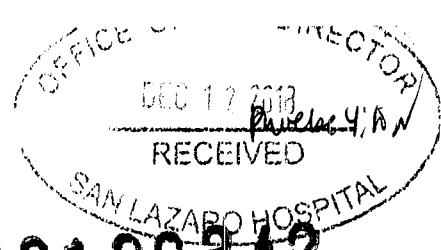




PURCHASE ORDER

SAN LAZARO HOSPITAL
Entity Name



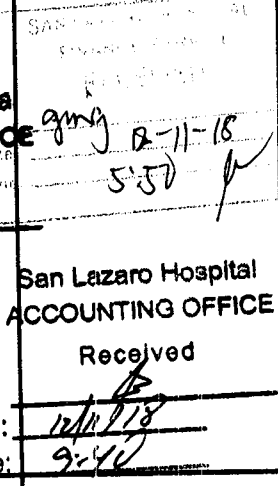
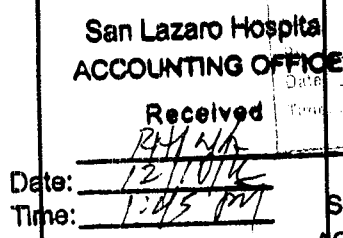
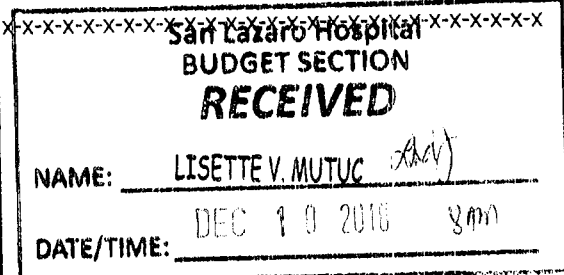
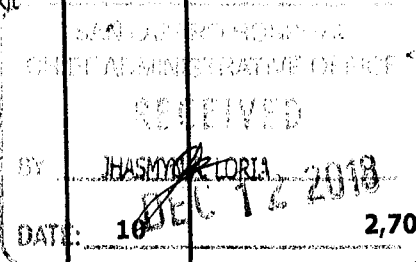
18120342
18-12-0342

Supplier : HEALTH - TECH MEDICAL INC.	P.O. No. : 18-12-0342
Address : No. 49-A Igdalig Street, Manresa Quezon City	Date : December 04, 2018
TIN :	Mode of Procurement : SHOPPING (Alternative Mode of Procurement)
Tel / Fax # : 737-9898 / 737-9890	BAC Resolution # : AMP - 036 s. 2018 Dated: October 29, 2018

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

Place of Delivery : <u>Materials and Management Dept. - San Lazaro Hospital</u>	Delivery Term : <u>Seven (7) Working Days</u>
Date of Delivery :	Payment Term :

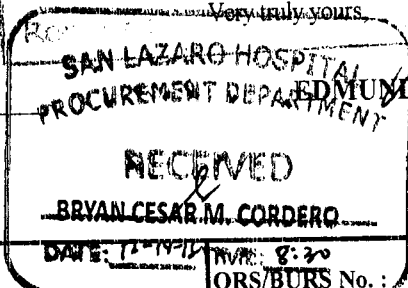
Stock/Property No.	Unit	Description	Quantity	Unit Cost	Amount
	pc	INTRA JUGULAR CATHETER FR. 11.5 KIT - straight extension dual lumen catheter kits, sterile kit (1) 11.5 fr catheter (1) dilator (2) dressing, (2) injection sealing caps BRAND & OFFERED: ARROW HEMODIALYSIS CATHETER DOUBLE LUMEN FR12 x 16cm CS-12122-F	30	2,300.00	69,000.00
	pc	INTRA JUGULAR CATHETER FR. 12 KIT - straight lumen curved extension catheter kit, sterile kit (1) 12 fr catheter, 18 gauge introducer needle, (1) J-tit Straight 0.038 guidewire, (1) 12 fr dilator, (2) dressing injection sealing cap BRAND & OFFERED: ARROW HEMODIALYSIS CATHETER TRIPLE LUMEN FR12 x 16cm CS-12123-F		2,700.00	27,000.00



Total Amount in Words	Ninety Six Thousand Pesos Only	96,000.00
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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 on the undelivered item/s.

Conforme:	<i>[Signature]</i> Signature over Printed Name of Supplier 12-14-18 Date	Very truly yours, EDMUNDO B. LOPEZ, MD, MPH, MHA Medical Center Chief II <i>[Signature]</i>
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Fund Cluster : 01	ORS/BURS No. : 02 10081 2018 01041
Funds Available:	Date of the ORS/BURS: 12/10/18
ANGELI JOYCE I. FIGURACION, CPA Accountant IV	Amount : P 96,000



Republic of the Philippines
 Department of Health
SAN LAZARO HOSPITAL

Manila, Philippines
 Telephone Nos.: 732-3776 to 78; 732-3106
 E-mail Address: sanlazaro@hospital@yahoo.com
 Official Website:



P No.: AMP 18-12-104

NOTICE TO PROCEED

E MANAGER
ALTH - TECH MEDICAL INC.
 . 49-A Igdalig Street, Manresa
 ezon City

Dear Sir/Madam:

This is to inform you that the **Purchase Order No. 18-12-0342** dated **December 2018** in the amount of **PHP 96,000.00** which was awarded through Alternative Mode of Procurement using **SHOPPING** under **BAC Resolution No. AMP-036 s. 18** dated **October 29, 2018** for the procurement of **Medical Supplies** has been approved. You may now proceed with the delivery of items as indicated in the Purchase Order (PO).

Delivery should be completed within **Seven (7) Working Days** to commence upon receipt of this notice.

Enclosed in the original Purchase Order for your reference in the executing of this transaction.

Very truly yours,

MUNDO B. LOPEZ, MD, MPH, MHA
Medical Center Chief II

CERTIFIED TRUE COPY
 PROCUREMENT SECTION

EMILYN A. CRISTOBAL

Knowledge Receipt of This Notice on: 12-14-18

Name of the Representative of the Bidder: MANILA - MAREDA

Authorized Signature: ASH