PURCHASE ORDER

SAN LAZARO HOSPITAL
Entity Name

Supplier	ZUELLIG PHARMA CORPORATION	P.O. No. :	20-01-0015
Address :	Km 14 West Service Rd. SSH Cor.. Edison Ave.. Brgy Sun Valley Paranaque City	Date :	22-Jan-20
TIN :		Mode of Procurement :	AMP-Small Value Procurement
Tel / Fax # :	908-2222 / 325-0641	BAC Resolution # :	AMP - 018-A s. 2019

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

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

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
	cans	Complete Nutrition Formula (Polymeric) 400 grams/can, Complete and Balance Nutrition for Oral and Tube Feeding Offered: Ensure Gold Vanilla HMB Standard formula for enteral nutrition for the Elderly, gluten and lactose free, with 28 vitamins and minerals, with .74g HMB per serving Vanilla flavor, 400g. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	450	195.00	87,750.00
Total Amount in Words		**Eighty Seven Thousand Seven Hundred Fifty Pesos Only**			**87,750.00**

OFFICE OF THE DIRECTOR
FEB 0 5 2020
Ernani T. San Pedro
RECEIVED
SAN LAZARO HOSPITAL

qmg 1-31-2020
2-4-2020
4:10

FEB 0 5 2020
MARICEL A. ROGERO
2-5-20
1:27 PM

SAN LAZARO HOSPITAL
PROCUREMENT DEPARTMENT
RECEIVED
DATE: 2/6/2020 TIME: 2:20

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

Very truly yours,

2/6/2020
2:45

Signature over Printed Name of Supplier

Date

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

Fund Cluster : 05
Funds Available:

ORS/BURS No. : 02-244443-2020-01-0
Date of the ORS/BUR : 1/24/2020