

PURCHASE ORDER

SAN LAZARO HOSPITAL
PROCUREMENT DEPARTMENT

RECEIVED

DATE: 5/26/2020 TIME: 4:10

SAN LAZARO HOSPITAL
Entity Name

Supplier : JOLLYMED ENTERPRISES	P.O. No. : 20-05-0186
Address : 1629 Alvarez St., Sta. Cruz, Manila	Date : May 18, 2020
TIN : _____	Mode of Procurement : Emergency Purchase
Tel / Fax # : 712-8162; 869-7063; 252-4823; 313-7679	BAC Resolution # : AMP - 032 s. 2020 Dated: April 15, 2020 AMP 032-A s. 2020 Dated: May 14, 2020

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
	units	FINGER PULSE OXIMETER	12	1,000.00	12,000.00
		BRAND: TOPCARE			
	units	SPHYGMOMANOMETER / BP APPARATUS -	12	890.00	10,680.00
		BRAND: INMED			
		X-X			

SAN LAZARO HOSPITAL
FINANCE SERVICE
RECEIVED
By Angie
Date 5-24-2020
Time 9:25

OFFICE OF THE DIRECTOR
MAY 21 2020
Emani T. San Pedro
RECEIVED
SAN LAZARO HOSPITAL

Total Amount in Words	Twenty Two Thousand Six Hundred Eighty Pesos Only	22,680.00
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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: _____ Very truly yours,

Signature over Printed Name of Supplier _____

Date _____

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

Fund Cluster : <u>05</u>	ORS/BURS No. : <u>02-206443 - 2020-05-0113</u>
Funds Available: _____	Date of the ORS/BURS: <u>MAY 19, 2020</u>
<u>ANGELI JOYCE I. FIGURACION, CPA</u> Accountant IV	Amount : <u>₱ 22,680</u>

SAN LAZARO HOSPITAL
CHIEF ADMINISTRATIVE OFFICE

San Lazaro Hospital
BUDGET SECTION