

PURCHASE ORDER

SAN LAZARO HOSPITAL

Entity Name

18110334

Supplier : GLOBAL CRITICARE, INC. Address : 3106 One Corporate Center Doña Julia Vargas Ave. cor. Meralco Avenue, Ortigas Center, Pasig City TIN : _____ Tel / Fax # : (632) 922-8255 / Fax: (632) 921-5103	P.O. No. : 18-11-0334 Date : November 07, 2018 Mode of Procurement : SMALL VALUE BAC Resolution # : AMP - 019 s. 2018 Dated: Septembet 19, 2018
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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	BAG VALVE MASK - NEONATE , 240ml, Autoclavable Heavy Duty, Yellowish-White Silicon, with Pressure Release Valve, with 2 pcs Face Mask, 3 Oral Airways Reservoir Bag and Oxygen Tubing BRAND: CRITICARE (sample are acceptable by end-user)	5	3,400.00	17,000.00
	units	BAG VALVE MASK - PEDIA , Manual Type Autoclavable Heavy Duty, Transparent. Mask material with Rubber Rim, Heavy duty with automatic Pressure Control per Oxygen and Air Intact Volume Autoclavable Silicone/Rubber BRAND: CRITICARE (sample are acceptable by end-user)	5	3,600.00	36,000.00
	units	BAG VALVE MASK - ADULT , Autoclavable, Silicon bag with face mask, Oxygen Tubing, Reservoir bag, 2,600ml, with complete accessories and available parts BRAND: CRITICARE (sample are acceptable by end-user)	15	3,900.00	36,900.00

OFFICE OF THE DIRECTOR
 NOV 29 2018
 RECEIVED
 SAN LAZARO HOSPITAL

SAN LAZARO HOSPITAL
 PROCUREMENT DEPARTMENT
 RECEIVED
 LANDRIZA P. SABLON
 DATE: 12-04-18 TIME: 9:00 AM

San Lazaro Hospital
 BUDGET SECTION
RECEIVED
 NAME: ARVEY E. CRUZ
 DATE/TIME: 11/21/18

San Lazaro Hospital
 ACCOUNTING OFFICE
 Received
 Date: 11/20/18
 Time: 3:12 PM

San Lazaro Hospital
 ACCOUNTING OFFICE
 Received
 Date: 11/23/18
 Time: 10:00 AM

Total Amount in Words: One Hundred Eleven Thousand Five Hundred Pesos Only 111,500.00

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:
Ronald Alavizalas
 Signature over Printed Name of Supplier
12/4/2018
 Date

Very truly yours,
Edmundo B. Lopez
 EDMUNDO B. LOPEZ, MD, MPH, MHA
 Medical Center Chief II

Fund Cluster : 01
 Funds Available : 01

ORS/BURS No. : 02-101101-2018-N. 01005
 Date of the ORS/BURS : 11/22/18
 Amount : 111,500.00