



PURCHASE ORDER

By: WHENNEL
Date: 1-24-
Time: 9:25 AM

SAN LAZARO HOSPITAL
Entity Name

Supplier : METRO DRUG, INC.	P.O. No. : 19-10-0264
Address : Manalac Avenuc, Bagumbayan, Taguig City	Date : October 29, 2019
TIN : _____	Mode of Procurement ALTERNATIVE MODE OF PROCUREMENT (Small Val
Tel / Fax # : 837-2121/ Fax # 8373042	BAC Resolution # : AMP-086 s. 2019, dated August 1

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 : within SEVEN (7) day upon receipt of approved
Date of Delivery : _____	Payment Term : _____

Stock/Property No.	Unit	Description	Quantity	Unit Cost	Amount
	tabs	Biperiden Oral: 2mg/tablet, (as HCl) Brand Offered: AKIDIN, 100's (Item #36) XXXXXXXXXXXXXXXXXXXXXXXXXXXX	50	12.00	600
Total Amount in Words: SIX HUNDRED PESOS ONLY					600

OFFICE OF THE DIRECTOR
JAN 24 2020
Ernanil T. San Pedro
RECEIVED
SAN LAZARO HOSPITAL

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 imposed on the undelivered items

Conforme: _____

Very truly yours,
EDMUNDO B. LOPEZ, MD, MPH, MEd
Medical Center Chief of Staff

Signature over Printed Name of Supplier: _____
Date: _____

FAXED
DATE: 1/27/2020
BY: 8:47

Fund Cluster : 01	ORS/BURS No. : <u>02-10/18/2019-12</u>
Funds Available: _____	Date of the ORS/ : <u>1/14/19</u>
ANGELI JOYCE I. FIGURACION, CPA Accountant IV	Amount : <u>P 600</u>

SAN LAZARO HOSPITAL
PROCUREMENT DEPARTMENT
RECEIVED
1/28/20

San Lazaro Hospital
ACCOUNTING OFFICE
Received
1/24/19
1/26/19

San Lazaro Hospital
BUDGET SECTION
RECEIVED
LISETTE M. DE JESUS



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: www.sanlazaro.gov.ph



NTP No.: (AMP-DM-19-10-0264)

NOTICE TO PROCEED

**THE MANAGER
METRO DRUG, INC.
Mañalac Avenue, Bagumbayan
Taguig City**

Dear Sir/Madam:

This is to inform you that **Purchase Order No. 19-10-0264 dated October 30, 2019** in the amount of **PHP 600.00** which was awarded through **Alternative Mode of Procurement** (Small Value Procurement) with **BAC Resolution No. AMP-086, series 2019**, dated **August 19, 2019** for the procurement of **Drugs and Medicines** 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) days** to commence upon receipt of this notice.

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

Very truly yours,

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

I Acknowledge Receipt of This Notice on _____

Name of the Representative of the Bidder: _____

Authorized Signature: _____