



PURCHASE ORDER
SAN LORENZO RUIZ WOMEN'S HOSPITAL



Supplier : ZAFIRE DISTRIBUTORS, INC.
Address : #49 Examiner st., Brgy. West Triangle, Quezon City
Tel./Fax: 925-0500/928-4293
TIN : 233-495-266-000

P.O. No. : 2019-04-0030
Date April 17, 2019
Mode of Procurement : Public Bidding
PR no. 2019-01-0018

Gentlemen:

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

Place of Delivery : SLRWH, O. Reyes Santulan Malabon City

Delivery Term : 10 cd

Date of Delivery :

Payment Term : 30 days

Stock/	Unit	Description	Quantity	Unit Cost	Amount
	boxes	Cellpack DCL, ZPPTCT661628 Packaging: 20L Volume: 20,000	35	9,189.00	321,615.00
	boxes	Sulfolyser, P90411317 Packaging: 500 ml x 3 Volume: 1,500	7	21,694.50	151,861.50
	boxes	Lysercell WDF, BG689680 Packaging: 2L Volume: 2,000	21	4,500.00	94,500.00
	boxes	Fluorocell WDF, AA325279 Packaging: 22ml x 2 Volume: 44	9	16,195.50	145,759.50
	pack	XNL Control (L,N,H) Packaging: 3ml x 3 Volume: 1500	24	11,700.00	280,800.00
	bot	Washing Solution Hema Packaging: 120 ml Volume: 120 xxx-xx-xxx-xx-xxx-Nothing Follows-xxx-xx-xxx-xx-xxx	12	1,197.00	14,364.00
ONE MILLION EIGHT THOUSAND NINE HUNDRED PESOS ONLY					1,008,900.00

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:

Very truly yours,

Signature over Printed Name of Supplier

MARILOU T. NERY, MD, DPPS, MPH
CHIEF OF HOSPITAL II

Date

Fund Cluster :

Funds Available :

ORS/BURS No. :

Date of the ORS/BURS:

Amount :

HESSEL ANNE E. CAGUIA, CPA

Accountant II

Proc. /SPMU/Budget/COA-AC/COA/Acctg/Supplier Copy

