

Yellow (Duplicate) - Procurement

Republic of the Philippines PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Ave. Quezon City
Tel. No.: 8588-9900 loc. 224, 226, 361, 355
Fax no.: 85889997 • e-mail: pcmcproc@gmail.com

PURCHASE ORI	DER	73633	M	lo	73633
FOR SUPPLIES OF P. R. NO. PHAR-				i:	7/1/2022
MODE OF PROC		ENCY /			
CS No.			ACN	10202	22-407 M (NP)
DATE OF P.O.	Aug	ust 22, 2	022		

Depart	ment/Office/D	ivinian/Cart	on/Unit whom deli-	Deliver 1.7	- 1	O41 T	
			on/Unit where delivery agement Division	Delivery period: 7 working Performance Security Pos		Other Terms: Surety Bond	No
	March 1997 Control of the Control of	ound Floor, I		Cash / Cashier's / Manager's Check No.			140.
Special	Instructions_			PCMC O.R. No.		Amount P	
tem No.	QTY.	UNIT		ARTICLES		UNIT COST	TOTAL COS
1	120 -	bt /	Ciclosporin 100 mg/mL s	olution, 50 mL 🗸		6,634.84 -	796,180.80
2	3,000 <	tab 🖊	Mycophenolic Acid 360 mg tablet / "Myfortic" /			58.71 <u>/</u>	972,310.80
			***Nothir				VVVVVVVVVV
						e Hundred Seventy Two Thousand e Hundred Ten Pesos and 80/100)	
			For the use of Pharr	macy Division (CY-2022)			
			To be sourced from				
		All	deliveries shall have at lea	st One (1) year expiration per	riod.		
			VAT EXEMPT				
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						TO NO.	
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Pink - Supply and Property