

Republic of the Philippines

PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

Tel. No.: 8588-9900 Loc. 1329, 1330, 1331, 1332

Fax No.: 85889997 • E-mail: pcmcproc@gmail.com

PURCHASE ORDER: 77554

Date of P.O: 2024-11-27

PR NO: PHAR-2024-021-GF Dated: 2024-10-04

MODE OF PROCUREMENT: NP-Emergency

(53.2)

Address: 1000 PPL Building Corner San Marcelino Street / gmae.01@yahoo.com / 524-0091 to 98 - 526-0977					
Department/Office/Division/Section/Unit where delivery Delivery period: 7 Working					
Is to be made: Materials Management Division Location: Ground Floor, PCMC Bldg		Performance Security Posted: ☐ Cash ☐ Bank Guarantee ☐ Security Bond		ty Bond	
Special Instruction	No:	Guarantee	Amoun		
Item No QTY UNIT ARTICI		UNIT	COST	TOTAL COST	
1 1200 bt Sterile Water for Injection 1000n			22.95	27,540.00	
AKTIC	mL, twist cap / sealed rub follows xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	ber xxx	management of the control of the same of the control of the contro		
Penalty Clause for Delayed or Unsatisfactory Deliveries: 1. One-tenth (1/10) of one percent (1%) of the cost of unperformed portion for everyday of delay. Once the cumulative amount of liquidated damages reaches 10% of the amount of the					
contract, the Procuring Entity may reschid or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances. 2. Excess in price, if procurred from third parties, through alternative mode of procurement, and 3. In case of bidding, forfeiture of performance security equal to 5% of the undelivered item/s.					
Funding Code 5-02-03-070, mgs 12/0	7	TOTAL AMOUNT R 27,540.00			
			CERTIFICATION		
Attachment PR No: PHAR-2024-021-GF White Abstract of Canvass/Bids: 2024-702 BAC Resolution No: R2024-10-584 White No Phase Order, and held company bound by the terms and st the contract and other laws applicable of the contract and othe		and held the and stipulation of			
Stofferely DAMRP No.					
SONIA B. GONZALEZ, M.D., MSCHSM, MPM		Signatu	Signature over printed name		
Executive Director MILIZ		Date:			
Distribution: Original - Attachment to payment					

Duplicate -