



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: procurement@pcmc.gov.ph

PURCHASE ORDER: **78290**  
Date of P.O.: **2025-04-29**  
PR NO: **PHAR-2025-003-GF** Dated: **2025-02-13**  
MODE OF PROCUREMENT: **NP-Emergency**  
(53.2)

TO: Supplier/Dealer Contractor: **ZUELLIG PHARMA CORPORATION**  
Address: **Km. 14 West Service Road, South Superhighway, BRGY. SUN VALLEY, PARANAQUE CITY / rmarco@zuelligpharma.com, mcruz@zuelligpharma.com, cjgalera@zuelligpharma.com, asarboda@zuelligpharma.com, jsanjuan@zuelligpharma.com / 789-3444 loc. 464; 908-2222; 789-3463**

Department/Office/Division/Section/Unit where delivery  
Is to be made: **Materials Management Division**  
Location: **Ground Floor, PCMC Bldg**  
Special Instruction  
Delivery period: **7 Working Days** Other Terms: \_\_\_\_\_  
Performance Security Posted:  
☐ Cash ☐ Bank Guarantee ☐ Security Bond  
No: \_\_\_\_\_ Amount P: \_\_\_\_\_

Item No	QTY	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	500	VL	Iohexol VI 300mg iodine/mL, 50mL " Omnipaque 647mg/ml (equivalent to 300mg Iodine) Solution for Injection, 50ml, 10's  XXXXXXXXXXXXXXXXXXXX Nothing Follows XXXXXXXXXXXXXXXXXXXX For the use of Pharmacy Division To be sourced from COB All deliveries shall have at least One (1) year expiration period.	1,245.25	622,625.00  P 622,625.00 (Six Hundred Twenty Two Thousand Six Hundred Twenty Five Pesos)

**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 rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.  
2. Excess in price, if procured 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.

Funding Code <b>15-02-03-070 / mg 25/6</b>	<b>TOTAL AMOUNT P 622,625.00</b>
FUNDS AVAILABLE: <b>P 622,625.00</b> <b>LEA M. VILLALOBOS, DBA, CPA</b> Chief Accountant  APPROVED: <b>Maria Eva I. Jopsin, MD, MSChSM, MPM</b> OIC Executive Director	<b>CERTIFICATION</b> This is to certify that I received today the Original copy of this Purchase Order, and held the Company bound by the terms and stipulation of the contract and other laws applicable  Signature over printed name Date:
Distribution: Original - Attachment to payment Duplicate - Procurement/Materials Management Division	