

PURCHASE ORDER  
Province of Davao de Oro  
Agency/Procuring Entity

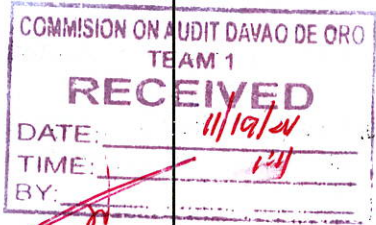
Supplier: EAH MEDICINE AND MEDICAL SUPPLIES MARKETING	PO Number: 24101783
Address: PUROK 2-A, TANDANG SORA, TAGUM CITY	Date: 10/22/24
E-mail Address:	Mode of Procurement NP-EC
Tel. No.:	PR Number: 24-C1720
TIN: 254-115-843	

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

Place of Delivery: PGSO-Warehouse	Delivery Term:
Date of Delivery: 10 days	Payment Term:

No.	Stock No.	Unit of Issue	Quantity	Description	Unit Cost	Amount
1	11166	bx/s	139.00	Amlodipine(as besilate)10mg tabs 100's - with CPRAMLOTHIX	965.00	134,135.00
2	11031	bx/s	182.00	Amlodipine(as besilate)5mg tabs 100's - with CPRAMLOTHIX	498.00	90,636.00
3	25168	box/s	20.00	Atorvastatin calcium ,Oral: 80 mg tablet ,100's with CPRATORSAPH	1,300.00	26,000.00
4	02821	box/s	5.00	Clozapine 100mg tablet with CPRSYCLOP	2,249.00	11,245.00
5	10850	box/s	80.00	Losartan Potassium 50mg tab 100's - with CPRLOSAAR	1,190.00	95,200.00
6	11075	bx/s	78.00	Losartan Potassium 100mg tab 30's - with CPRGENERIC	253.00	19,734.00
7	10860	box/s	39.00	Metformin 500mg tablet (as hydrochloride) 100's - with CPRGLYCEMET	220.00	8,580.00
8	17741	box/s	20.00	Olanzapine 10 mg x 30's with CPROLZAMAX	3,200.00	64,000.00
9	13150	bx/s	15.00	Omeprazole 40mg cap 50's - with CPRGENERIC	1,920.00	28,800.00
10	26347	box/s	20.00	Risperidone, Oral: 2 mg orodispersible tablet, 30's with CPRAMIDREX	973.00	19,460.00

CERTIFICATION:  
  
THIS IS TO CERTIFY THE ABOVE LISTED DRUGS AND MEDICINES ARE FOUND OR IN ACCORDANCE WITH THE PHILIPPINES FORMULATORY (PNP) ESSENTIAL DRUG LIST(EDL) VOLUME 1 8TH EDITION SERIES OF 2017.  
  
EXPIRATION DATE SHOULD NOT LESS THAN 1 1/2 YEARS FROM THE DATE OF DELIVERY



Total Amount in Words:

In case of failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for every day of delay shall be imposed.

Conform	<u>MELODY OHIDOR 10/29/24</u>	Very truly
	Signature over printed name of	
	<u>10-29-24</u>	
	Date	

**DOROTHY M. GONZAGA**  
Governor  
Authorized Official

**MADYLLJAN RIVERALES, JR.**  
Executive Assistant II

TRUST FUND  
OBR No.: 2024- 11- 0002  
Responsibility Center:  
Amount: 497,790.00

(In case of Negotiated Purchase pursuant to section 369(a) of RA 7180, this portion must be  
Approved per Sanggunian Resolution \_\_\_\_\_  
Certified \_\_\_\_\_ Date \_\_\_\_\_

OCT 28 2024

PURCHASE ORDER  
Province of Davao de Oro  
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Address: PUROK 2-A, TANDANG SORA, TAGUM CITY	Date: 10/22/24
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TIN: 254-115-843	

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

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Date of Delivery: 10 days	Payment Term:

No.	Stock No.	Unit of Issue	Quantity	Description	Unit Cost	Amount
				<p>PROGRESSIVE BILLING</p> <p>FOR THE USE OF PHO-CALAMITY VICTIMS OF THE 7.4 MAGNITUDE EARTHQUAKE-4TH QTR</p> <p>THE AWARD IS BASED ON ABSTRACT NO. 2410276 UNDER REQUEST FOR QUOTATION NO.10-24-3235 OPENED ON October 22, 2024</p>		

COMMISSION ON AUDIT DAVAO DE ORO  
TEAM 1  
RECEIVED  
DATE: 11/19/24  
TIME: 1:11  
BY: [Signature]

Total Amount in Words: Four Hundred Ninety Seven Thousand Seven Hundred Ninety Pesos Only	497,790.00
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In case of failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for every day of delay shall be imposed.

Conform MELDOR ENIDOR 10/29/24 Very truly  
Signature over printed name of  
10-29-24  
Date

DOROTHY M. GONZAGA  
Governor  
Authorized Official

By Authority of the Governor:  
MADYLLJAN N. PANALES, RN  
Executive Assistant II

TRUST FUND  
OBR No.: 2024-11-002  
Responsibility Center:  
Amount: 497,790.00

(In case of Negotiated Purchase pursuant to section 369(a) of RA 7180, this portion must be  
Approved per Sanggunian Resolution \_\_\_\_\_  
Certified \_\_\_\_\_ Date \_\_\_\_\_