

PURCHASE ORDER

Procuring Entity : City Government of Cagayan de Oro
 End User Unit : CITY HEALTH INSURANCE OFFICE
 Purchase Request (PR) Number : 24-3176
 PR Date : August 7, 2024
 PR Received by CGSO : September 02, 2024

ABC : PhP 957,600.00
 PPMP Code : CHIO24-BSB081
 Quotation No. : 2192-24
 CRN : 11254071



City Government of Cagayan de Oro

LGU

Supplier	: CIRCLE M MERCHANDISE TRADING CORPORATION	P.O. No.	: 3265-24
Address	: IPONAN, CAGAYAN DE ORO CITY	Date	: 19 DEC 2024
TIN	:	Mode of Procurement	: Small Value Procurement (Sec. 53.9)
		PR No./s	: 24-3176

Gentlemen

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

Place of Delivery	: CITY HEALTH INSURANCE OFFICE VIA CGSO FOR INSPECTION	Delivery Term	: THIRTY (30) CALENDAR DAYS
Date of Delivery	:	Payment Term	:

ITEM NO.	UNIT	DESCRIPTION	QTY	UNIT COST	AMOUNT
1	box	Amoxicillin (as trihydrate) 500 mg capsule, box of 100's	2000	199.75	399,500.00
2	box	Amoxicillin 100 mg/mL granules/powder for drops (suspension), 15 mL	500	19.50	9,750.00
3	bottle	Amoxicillin 250 mg/5 mL granules/powder for suspension, 60 mL	1440	39.85	57,384.00
4	box	Doxycycline Hyclate 100mg. Capsule, Box of 100's	3500	139.80	489,300.00
		x-x-x-x-x-x-x-x-x-x-x-x			
(Total Amount in Words) Nine Hundred Fifty-Five Thousand Nine Hundred Thirty-Four and 00/100 Pesos					Total
					Php 955,934.00

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.

Conforme:

Very truly yours,

 Signature over Printed Name of Supplier

 Date

 Signature over Printed Name of Authorized Official

 City Mayor
 Designation

Note: This serves as Notice of Award and Contract once Conformed within Ten (10) Days, by the Supplier.