PURCHASE ORDER

Tabaco City
LGU

Supplier	**LIXSOURCE TRADING**	P.O No.:	25-04-0450
Address	**PUROK 1, TAMAOYAN LEGAZPI CITY**	Date:	APR 0 8 2025
		Mode of Procurement:	**SHOPPING B**
		PR No./s	**25-03-0478**

Gentlemen:

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

Place of Delivery:	LGU-TABACO CITY - **CITY HEALTH UNIT (CHU-MCK)**	Delivery Term:	10cd
Date of Delivery:		Payment Term:	3 weeks

Item No.	Qty	Unit	DESCRIPTION	Unit Cost	Amount (Php)
			Supply & Delivery of Various Drugs and Medicines for MCK		-
1	50	box	Aspirin 80mg Table t100/box **(SCHEEPRIN)**	230.00	11,500.00
2	20	box	Gentamicin 40mg/ml, 2ml Solution for Injection Ampule 10s/box **(CENTACARE)**	223.00	4,460.00
3	100	box	Amlodipine 5mg Tablet, 100/box **(AMLOTHIX)**	138.00	13,800.00
4	100	box	Calcium Carbonate 500mg Table, 100/box **(AMBICAL)**	342.00	34,200.00
5	20	box	medroxyprogesterone 150mg/ml, 1ml Suspension for Injection Vial 25/box **(DEPO-GESTIN)**	3,399.00	67,980.00
6	50	pcs	Fluticasone + Salmeterol 125mcg + 25mcg, 120 Actuations Metered Dose Inhaler **(AROFLO)**	449.95	22,497.50
7	10	box	Montelukast 10mg Tablet 100/box **(LEUKOREX)**	595.00	5,950.00
8	100	box	Paracetamol 500mg Tablet 100/box **(ALAGESIC)**	315.00	31,500.00
9	50	bottle	Clarithromycin 250mg/5ml, 50ml Oral Suspension Bottle **(RM)**	894.03	44,701.50
10	20	box	Prednisone 20mg Tablet 100/box **(STEROLORT)**	549.00	10,980.00
11	100	bottle	Co-Amoxiclav (Amoxicillin + Clavulanic Acid) 400mg + 57mg/5ml, 70ml Oral Suspension Bottle **(MEOXILLAN)**	314.50	31,450.00
12	10	box	Cefuroxime 500mg Tablet 100/box **(THEOROXIME)**	1,998.00	19,980.00
13	10	box	Hyoscine 10mg Tablet 100/box **(HYOSPAN)**	600.00	6,000.00
			nothing follows		-
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				TOTAL	**304,999.00**

Three Hundred Four Thousand Nine Hundred Ninety Nine Pesos

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

CONFORME:	Very Truly yours,
Jam Gerard Asor	**CIELO KRISEL BURCE LAGMAN**
(Signature over printed name)	*City Mayor*
(Date) 04-09-25	

(In case of Negotiated Purchase pursuant to section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sangguniang Resolution No.:	
	Date:
Certified Correct:	
Secretary to the Sanggunian	