



## PURCHASE ORDER

Procuring Department: **OMPH**

Supplier : **RBC-MDC CORPORATION** P.O.: **1 0 0 1 9 1 2 No. 0039**

Address : **Alabang Hills, Muntinlupa City**

E-mail Address : \_\_\_\_\_ Date : **December 26, 2019**

Telephone No. : **0915-548-1622** Mode of Procurement : **Negotiated/Two Failed Bidding**

TIN : **206-416-136-000**

Gentlemen:

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

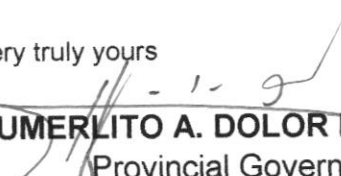
Place of Delivery: **OMPH** Delivery Term: **w/ in 7 calendar days upon receipt of NTP**

Payment Term : **charge**

Item No.	UNIT	DESCRIPTION	QTY.	UNIT COST	AMOUNT
		Department of Health not for sale"  Date Manufactured: Date of Expiry:  Additional Technical Documents: 1. Valid PFDA Certificate Product Registration (CPR) or Valid Extension; 2. Valid and Current License to Operate (LTO) for drug distributors and traders issued by Philippine Food & Drugs Administration (PFDA). Provided, that the application for renewal was made timely as per PFDA Circular no. 2011-004 In case of expired LTO, the following copies may be submitted: (i) Expired LTO; (ii) Application for renewal and; (iii) Official receipt as proof of payment of Renewal of LTO  <b>continuation at the next page...</b>			

**TOTAL AMOUNT IN WORD): two hundred nine thousand three hundred four pesos only**

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 everyday of delay shall be imposed.

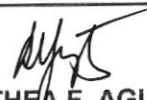
Very truly yours  
  
**HUMERLITO A. DOLOR MPA, PhD.**  
 Provincial Governor

Conforme:

  
**VICTOR MUANES**

Signature Over Printed Name of Supplier  
 Date **12-20-2019**

Funds Available:

  
**ALTHEA F. AGUTAYA**  
 Provincial Accountant

OBLIGATION REQUEST NO: \_\_\_\_\_

AMOUNT : \_\_\_\_\_