

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT FIELD OFFICE V

Regional Center Site, Rawis, Legazpi City, Albay

PURCHASE ORDER

Supplier:	PHARMEDICS MEDICAL EQUIPMENT AND SUPPLY TRADING	PO. No.:	NF2025-0110
Address:	Cabangan, Camalig, Albay	Date:	March 27, 2025
Contact No.:	09105886177	Mode of Procurement:	Small Value Procurement (53.9)
Gentlemen:	Please furnish this Office the following articles subject to the terms and conditions contained herein:	Payment Term:	30-60 Calendar Days from Receipt of SOA/Billing
		Delivery Term:	One-Time Full Delivery
Place of Delivery:	RRCY Pangpang, Sorsogon City	For Delivery Schedule and Queries Please Contact C.M.U.:	0963-698-4404
Date of Delivery:	15 Calendar Days		

Item No.	Unit	Quantity	Unit Cost	Amount
PURCHASE OF MEDICAL SUPPLIES FOR USE OF RRCY CLIENTS AND RESIDENTS FOR 2nd AND 3rd QUARTER, CY 2025				
1	tablet	1,200	3.95	4,740.00
2	capsule	1,000	3.64	3,640.00
3	capsule	500	10.40	5,200.00
4	tablet	528	5.20	2,745.60
5	tablet	100	10.40	1,040.00
6	tablet	50	36.40	1,820.00
7	capsule	100	6.24	624.00
8	tablet	100	7.28	728.00
9	tablet	200	5.20	1,040.00
10	tablet	500	14.56	7,280.00
11	capsule	100	15.60	1,560.00
12	capsule	240	10.40	2,496.00
13	box	4	468.00	1,872.00
14	roll	40	114.40	4,576.00
15	box	10	156.00	1,560.00
16	box	4	499.20	1,996.80
17	pcs	100	20.80	2,080.00
18	bottle	4	312.00	1,248.00
19	bottle	4	520.00	2,080.00
20	tube	6	416.00	2,496.00
21	tube	6	239.20	1,435.20
22	tube	8	208.00	1,664.00
23	tube	4	291.20	1,164.80
24	bottle	3	832.00	2,496.00
25	bottle	4	1,144.00	4,576.00
26	bottle	4	676.00	2,704.00
27	tube	2	884.00	1,768.00
28	pack	40	93.60	3,744.00
29	pack	50	187.20	9,360.00
30	bottle	12	312.00	3,744.00
31	bottle	4	187.20	748.80
<p>Note: Expiration date must atleast within 1-2 years upon delivery</p> <p>This encompasses all requirements conformed in the Request for Quotation (RFQ) and Checklist End-User Requirements for Venues and Accommodation for DSWD Activities. In the event of fortuitous events or other circumstances leading to a reduced number of participants, adjustments will be made either prior to the activity or in the subsequent days, in coordination with the End-User.</p>				

Total Amount in Words: **Eighty Four Thousand Two Hundred Twenty Seven Pesos and Twenty Centavos** / **GRAND TOTAL 84,227.20**

CONDITIONS:

LIQUIDATED DAMAGES: One-Tenth Of One Percent (0.001) of the cost of the unperformed portion of the contract for every day of delay. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the DSWD FOV may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.

The Supplier/Contractor acknowledges and agrees that any acts falling under Section 65 (Offenses and Penalties) and Section 69 (Imposition of Administrative Penalties and Blacklisting) of the Implementing Rules and Regulations (IRR) of Republic Act No. 9184 (Government Procurement Reform Act), as well as other relevant procurement laws and regulations, shall subject the Supplier/Contractor to blacklisting, administrative, civil, and/or criminal liabilities in accordance with applicable laws and regulations.

Conforme:

PHARMEDICS MEDICAL EQUIPMENT AND SUPPLY

Signature over Printed Name of Supplier

Date: 04/10/25

NORMAN S. LAURIO

Regional Director

Funds Available:

WENDY G. RANCES
Accountant III

ORS No.:

25-04-02183

Amount:

84,227.20