



PURCHASE ORDER

DELIVERY DUE DATE: 01-04-2020

Procurement Unit

Telephone No.: 045-606-8142/606-8157

Supplier : **GACN ENTERPRISES**

Address : Ilang-Ilang St., San Vicente, Tarlac City

TIN#: 245-990-975-000 VAT Reg.

Tel. No. : 0933-129-4370

PR No.: 2019-10-388

PO No.: 2019-754

Date: 11/22, 2019

Mode of Procurement: Small Value

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

Place of Delivery: **TARLAC STATE UNIVERSITY**

Delivery Term: 30 Calendar Days

Date of Delivery: _____

Payment Term: N/30

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	cap	AMOXICILLIN, 500mg (Axmel)	400	2.90	1,160.00
2	tablet	ANTACID, Kremil-S	1000	9.00	9,000.00
3	piece	ARM SLING, Medical arm sling	6	150.00	900.00
4	piece	ELASTIC BANDAGE, Brown, 2"	100	40.00	4,000.00
5	bottle	EYE DROP, Visine/Refresh 6ml	10	245.00	2,450.00
6	pair	GLOVES, Clean Gloves	250	5.00	1,250.00
7	box	GLOVES, Disposable, 100pcs/box, medium size	10	250.00	2,500.00
8	box	GLUCOMETER, Test Strip, for one touch select: code 25	5	2,950.00	14,750.00
9	tablet	HYOSINE, Buscopan, 10mg	500	30.00	15,000.00
12	pack	MASK, Face, Disposable, non-woven (50pcs/pack)	5	250.00	1,250.00
13	box	MASK, Surgical Mask, Flexor N 95 Mask, disposable 20pcs/box	1	950.00	950.00
14	box	MASK, Surgical, face mask 3ply, with earloop, disposable 50pcs/box	5	250.00	1,250.00
15	cap	MEFENAMIC ACID, 500mg (Infamix)	3400	4.95	16,830.00
16	tube	OINTMENT, Flammazine Burn, Silver, Sulfadiazine	10	343.50	3,435.00
18	Caplet	PARACETAMOL, Biogesic 600mgs	3000	7.50	22,500.00
Sub-Total					97,225.00

(Total Amount in Words)

Warranty shall be for a period minimum of three (3) months for expendable supplies, or a minimum period of one (1) year for non-expendable supplies. In case of failure to make 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.

Very truly yours,

DR. GLENARD T. MADRAGA
VP, Admin. & Finance

Authorized Official

Conforme:

[Signature] 12/5/19

GACN ENTERPRISES

(Signature over printed name & date)

Bank Account Name: _____

Bank Account Number: _____

Bank Name: _____

Bank Address: _____



Funds Available:

[Signature]
IESUS S. DANGANAN
Budget Officer

ALOBS No. :
Amount :

ok noted 12/5/19



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Procurement Unit

Telephone No.: 045-606-8142/606-8157

DELIVERY DUE DATE: 01-04-2020

Supplier : **GACN ENTERPRISES**
Address : Ilang-Ilang St., San Vicente, Tarlac City
TIN#: 245-990-975-000 VAT Reg.
Tel. No. : 0933-129-4370

PR No.: 2019-10-388
PO No.: 2019-764
Date: 11/22/2019
Mode of Procurement: Small Value

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

Place of Delivery: **TARLAC STATE UNIVERSITY**
Date of Delivery: _____

Delivery Term: 30 Calendar Days
Payment Term: N/30

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
		Balance Forwarded			97,225.00
20	bottle	SANITIZER , Hand Sanitizer, Anti-Bacterial, Kills 99.99% of germs. 55ml	60	45.00	2,700.00
21	box	SYRINGE , Disposable 3 ml w/ detachable needle	1	320.00	320.00
22	box	TONGUE DEPRESSOR , Sterile, wooden 100pcs/box	4	200.00	800.00
23 & 30	bottle	ALCOHOL , Isoprophyl with moisturizer, 70%, 50ml	40	80.00	3,200.00
24	piece	BURS , Round	6	75.00	450.00
25	piece	BURS , Straight	6	75.00	450.00
26	box	GLOVES , Micro Super, 100pcs/box	20	220.00	4,400.00
27	bottle	MOUTHWASH , 500ml	6	350.00	2,100.00
28	bottle	ALCOHOL , 70% Ethyl (500ml)	70	85.00	5,950.00
29	bottle	ALCOHOL , 70%, 500ml Isoprophyl alcohol	2	120.00	240.00
32	box	BAND AID , Plastic Strips 100pcs/box	10	150.00	1,500.00
33	pack	BIB , Assorted Color 100 pcs/pack	16	300.00	4,800.00
34	piece	BUR SURGICAL , Round	10	300.00	3,000.00
35	pack	COTTON , Balls, 150pcs/pack pure and absorbent cotton	25	60.00	1,500.00
Sub-Total					128,635.00

(Total Amount in Words)

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Very truly yours,

DR. GLENARD T. MADRIAGA
VP, Admin. & Finance
Authorized Official

Conforme:

GACN ENTERPRISES

(Signature over printed name & date)

Bank Account Name: _____
Bank Account Number: _____
Bank Name: _____
Bank Address: _____



Funds Available:

JESUS S. DANGANAN
Budget Officer

ALOBS No. :
Amount :



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Telephone No.: 045-606-8142/606-8157

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PR No.: 2019-10-388

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Mode of Procurement: Small Value

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Date of Delivery: _____

Payment Term: N/30

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
Balance Forwarded					128,635.00
37	pack	COTTON, Tipped Applicator 6" Wooden, Sterile, 100pcs/ pack	5	180.00	900.00
40	piece	ELASTIC BANDAGE, Brown 3"	30	70.00	2,100.00
41	piece	ELASTIC BANDAGE, Brown 4"	30	80.00	2,400.00
42	piece	GAUZE PAD, Eye Patch	30	77.00	2,310.00
43	box	GAUZE PAD, Sterile, 2x2, 100pcs/box	5	440.00	2,200.00
44	box	GAUZE PAD, Sterile, 4x4, 100pcs/box	5	690.00	3,450.00
46	box	GLOVES, Micro Super, 100pcs/box (Small)	20	220.00	4,400.00
47	pair	GLOVES, Sterile Gloves, Size 6	250	60.00	15,000.00
50	piece	NASAL CANNULA, for non-toxic PVC compound 1.8 meters of non-kink star lumen PVC tubing Nasal prongs made of soft PVC, Oxygen Cannula,Adult	100	100.00	10,000.00
51	piece	NEBULIZING KIT, Nebulizer Medication jar and cap Tee Mouthpiece 7-foot tubing Standard Connector	100	72.00	7,200.00
55	box	SURGICAL TAPE, Transpore 1" x 10 yards	5	170.00	850.00
56	box	SURGICAL TAPE, Transpore 2" x 10 yards	3	195.00	585.00
57	piece	SUTURE, Silk 0 (Cutting Needle)	10	145.00	1,450.00
58	piece	SUTURE, Silk 3-0 (Cutting Needle)	10	145.00	1,450.00
59	tablet	AMLODIPINE, 5mgs (Lodipex)	200	9.95	1,990.00
Sub-Total					184,920.00

(Total Amount in Words)

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Very truly yours,

DR. GLENARD T. MADRIAGA

VP, Admin. & Finance

Authorized Official

Conforme:

GACN ENTERPRISES

(Signature over printed name & date)

Bank Account Name: _____

Bank Account Number: _____

Bank Name: _____

Bank Address: _____

Funds Available:

JESUS S. DANGANAN

Budget Officer

ALOBS No. :

Amount :

