CONTRACT AGREEMENT

This AGREEMENT made this 21st day of February 2024 between the PROVINCIAL GOVERNMENT OF PANGASINAN, of the Philippines (hereinafter called the "Procuring Entity") of the one part and NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP (hereinafter called the "Contractor/Supplier") of the other part;

WHEREAS, the Entity is desirous that the Contractor execute the Supply and Delivery of Various Medical Supplies at Umingan Community Hospital, Umingan, Pangasinan; Medical, Dental and Laboratory Expenses; PR No. 2024-01-0030; Solicitation No. PANG-2024-01-0049-G, and the Entity has accepted the Bid for Nine Million, Seven Hundred Twenty-Seven Thousand, Seven Hundred Fifty-Four Pesos and 56/100 Only (P9,727,754.56) by the Contractor for the execution and completion of such Works and to remedy any defects therein.

NOW, THIS AGREEMENT WITNESSETH AS FOLLOWS:

- 1. In this Agreement words and expressions shall have the same meanings as are respectively assigned to them in the Conditions of Contract referred to.
- 2. The following documents as required by the 2016 revised Implementing Rules and Regulations of Republic Act No. 9184 shall be deemed to form and be read and construed as integral part of this Agreement, viz.:
 - i. Philippine Bidding Documents (PBDs);
 - i. Schedule of Requirements;
 - ii. Technical Specifications;
 - iii. General and Special Conditions of Contract; and
 - iv. Supplemental or Bid Bulletins, if any
 - ii. Winning bidder's bid, including the Eligibility requirements, Technical and Financial Proposals, and all other documents or statements submitted.

Bid form, including all the documents/statements contained in the Bidder's bidding envelopes, as annexes, and all other documents submitted (e.g., Bidder' response to request for clarifications on the bid), including corrections to the bid, if any, resulting from the Procuring Entity's bid evaluation.

- iii. Performance Security;
- iv. Notice of Award of Contract; and the Bidder's conforme thereto; and
- v. Other contract documents that may be required by the existing laws and/or the Procuring Entity concerned in the PBD's. Winning bidder agrees that the additional contract documents or information prescribed by the contract execution, such as the Notice to Proceed. Variation Orders, and warranty Security, shall likewise form part of the Contract.
- 3. In consideration for the sum of Nine Million, Seven Hundred Twenty-Seven Thousand, Seven Hundred Fifty-Four Pesos and 56/100 Only (P9,727,754.56) or such other sums as may be ascertained, NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP agrees to the Supply and Delivery of Various Medical Supplies at Umingan Community Hospital, Umingan, Pangasinan; Medical, Dental and Laboratory Expenses; PR No. 2024-01-0030; Solicitation No. PANG-2024-01-0049-G, in accordance with his/her/its Bid.
- The PROVINCIAL GOVERNMENT OF PANGASINAN agrees to pay the abovementioned sum in accordance with the terms of the Bidding.

ACT ECALLY Tolerade (III) 27 - 15	The state of the s
	ve caused this Agreement to be executed in the day and
year first above written.	
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4-17	("
HON. RAMON V. GUICO III	MS. JIANNA MIKHAELA P. LOPEZ
Governor	Authorized Representative
	Fem
For:	For:
PROVINCIAL GOVERNMENT	NORTHCARE PHARMACEUTICAL
OF PANGASINAN	DISTRIBUTORSHIP
ACKNOWL	EDGEMENT
Republic of the Philippines)	
Province of Pangasinan) S	.S.
Municipality of Management (
DEFORE ME - Notes Public Consulting	MEN PANGE Pangeline Philippines personally
BEFORE ME , a Notary Public, for and in_appeared the following with their respective pro-	, Pangasinan, Philippines, personally
ippeared the following with their respective pro-	FB 2 1 2024
	2-21-20
HON. RAMON V. GUICO III	Proof of Identity : TIN
(Governor)	Licensed No, : 159-902-046-00000 Date Issued : September 8, 2019
	Date Issued . September 8, 2019
MS. JIANNA MIKHAELA P. LOPEZ	Proof of Identity :
(Contractor)	Date Issued :
	Expiry date :
Known to me and to me known to be the	same person who executed and signed the foregoing
	the same are their true and voluntary acts and deeds and
that of the agency/entity they respectively repr	
,,,	
	ENT for the Supply and Delivery of Various Medica
Supplies at Umingan Community Hospi	tal Umingan Pangasinan Madical Dantal and
	0; Solicitation No. PANG-2024-01-0049-G, consisting
of Two (2) pages including this page where the	0; Solicitation No. PANG-2024-01-0049-G, consisting a cknowledgement is written. Pages One and Two are
of Two (2) pages including this page where the signed on the corresponding spaces provided	0; Solicitation No. PANG-2024-01-0049-G, consisting the acknowledgement is written. Pages One and Two are thereof by the Parties and their instrumental witnesses
of Two (2) pages including this page where the signed on the corresponding spaces provided and sealed with my notarial seal.	0; Solicitation No. PANG-2024-01-0049-G, consisting the acknowledgement is written. Pages One and Two are thereof by the Parties and their instrumental witnesses
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of Two (2) pages including this page where the signed on the corresponding spaces provided and sealed with my notarial seal. WITNESS MY HAND AND SEAL this Pangasinan.	day of day of Notary Public Until 31, December 20 Notary Public Until 31, December 20 Issued at Issued at Issued on:
of Two (2) pages including this page where the signed on the corresponding spaces provided and sealed with my notarial seal. WITNESS MY HAND AND SEAL this Pangasinan.	o; Solicitation No. PANG-2024-01-0049-G, consisting the acknowledgement is written. Pages One and Two are thereof by the Parties and their instrumental witnesses. FEB 2 1, 2024 day of, in



Republic of the Philippines PROVINCE OF PANGASINAN

Office of the Governor

2F Capitol Compound, Lingayen, Pangasinan

Hon. Ramon V. Guico III, DPM Governor

NOTICE OF AWARD

19 February 2024

MS. JIANNA MIKHAELA P. LOPEZ
Authorized Representative
NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP
15 Camanang Roadside,
Urdaneta City, Pangasinan

Dear Ms. Lopez:

We are happy to notify you that your bid dated February 12,2024, for Supply and Delivery of Various Medical Supplies at Umingan Community Hospital, Umingan, Pangasinan; Medical, Dental and Laboratory Expenses; PR No. 2024-01-0030; Solicitation No. PANG-2024-01-0049-G, is hereby awarded to you as the Bidder with Lowest Calculated and Responsive Bid at a contract price equivalent to Nine Million, Seven Hundred Twenty-Seven Thousand, Seven Hundred Fifty-Four Pesos and 56/100 Only (P9,727,754.56).

You are hereby required to provide within ten (10) days the performance security in the form and the amount stipulated in the Instruction to Bidders. Failure to provide the performance security shall constitute sufficient ground for cancellation of the award and forfeiture of the bid security.

Very truly yours,

HON. RAMON V. GUICO III

Conforme: JANIA MIN JAEL

Date 2 -19-24



Republic of the Philippines

PROVINCE OF PANGASINAN

Office of the Governor

2F Capitol Compound, Lingayen, Pangasinan

Hon. Ramon V. Guico III, DPM Governor

NOTICE TO PROCEED

23 February 2024

MS. JIANNA MIKHAELA P. LOPEZ
Authorized Representative
NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP
15 Camanang Roadside,
Urdaneta City, Pangasinan

Dear Ms. Lopez:

The attached Contract Agreement having been approved, notice is hereby given to NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP that the work may commence on the Supply and Delivery of Various Medical Supplies at Umingan Community Hospital, Umingan, Pangasinan; Medical, Dental and Laboratory Expenses; PR No. 2024-01-0030; Solicitation No. PANG-2024-01-0049-G, effective within seven (7) calendar days after the receipt of this notice.

Upon receipt of this notice, you are responsible for performing the services under the terms and conditions of the Agreement and in accordance with the Implementing Schedule.

Please acknowledge receipt and acceptance of this notice by signing both copies in the space provided below. Keep one and return the other to the **Provincial Government of Pangasinan.**

Very truly yours,

HON. RAMON V. GUICO III

I acknowledge receipt of this Notice on Name of the Representative of the Bidder Authorized Signature 1 - 23 - 2

JIANNA MIKHAELA P. LOPEZ

PURCHASE ORDER

PROVINCE OF PANGASINAN LGU

2-21-24

Date

P.O. No. : Supplier: NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP Date: Address : URDANETA CITY, PANGASINAN Mode of Procurement: competitive bidding PR No./s 2024-01-0030 293-548-871-00000 Gentlement: Please furnish this Office the following articles subject to the terms and conditions contained herein: Delivery Term: w/in 7 C.D. upon receipt of NTP Place of Delivery: Umingan Community Hospital, Umingan, Pangasinan Payment Term: Cheque Date of Delivery: Stock/ Unit Description Quantity **Unit Cost** Amount Property No. 4000 45.00 180,000.00 MACROSET PCS 3200 50.00 160,000.00 PCS MICROSET 25.00 1,000.00 PCS NGT FR. 12 40 NON STERILE GLOVES (MEDIUM) 600 850.00 510,000.00 BOX 150,000.00 750.00 BOX LASTER 3M, 1 INCH 40 SILK 3-0, CUTTING 2,820.00 112,800.00 BOX BOX SILK 2-0, CUTTING 20 2,820.00 56,400.00 SOLUSET 230.00 92,000.00 PCS 38,000.00 ROLL SURGICAL GAUZE ROLL 20 1,900.00 2,298.00 22,980.00 SPOULES 10 10 BOX SURGICAL FACE MASK 100 200.00 20,000.00 11 BOX BOX SUGICAL GLOVES 7* 40 1,750.00 70,000.00 12 7,000.00 35.00 URINE BAG, ADULT 200 13 PCS (Total Amount in Words) PAGE 1 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 on the undelivered item/s Conforme: HON, RAMON V. GUICO III Signature over Printed Name of Supplier Signature over Printed Name of Authorized Official Governor Designation (In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.) Approved per Sanggunian Resolution No.: Certified Correct:

Secretary to the Sanggunian

PURCHASE ORDER

PROVINCE OF PANGASINAN LGU

Address: URDANETA CITY, PANGASINAN TIN: 293-548-871-00000 Gentlement: Please furnish this Office the following articles subject to the terms			Date: 2 FEB 2024 Mode of Procurement competitive bidding			
			PR No./s 2024-01-0030			
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount	
14	вох	WEE BAG	Atonth 6	750.00	4,500.00	
15	PCS	AMBU BAG, ADULT	10 189 4	4,750.00	47,500.00	
16	PCS	AMBU BAG, PEDIA	Og on 8 none	4,750.00	38,000.00	
17 752	PCS	DIGITAL THERMOMETER	40	150.00	6,000.00	
18	PCS	KIDNEY BASIN	20 100	36.00	720.00	
19	PCS	KELLY PAD	4610.00	1,100.00	6,600.00	
20	PCS	MAYO SCISSORS STRAIGHT 6"	10	500.00	5,000.00	
21	PCS	NEBULIZER	6	750.00	4,500.00	
22	PCS	PULSE OXIMETER (FINGERTIP)	10	975.00	9,750.00	
23	PCS	SPHYGMOMANOMETER DEST TYPE, ADULT	on per l'10 reg be	3,200.00	32,000.00	
24	PCS	SPHYGMOMANOMETER DEST TYPE, PEDIA	4	3,200.00	12,800.00	
25	PCS	STETHOSCOPE, ADULT	10	500.00	5,000.00	
26	PCS	CERVICAL COLLAR SMALL	12	1,000.00	12,000.00	
(Total Amoun	nt in Words)	PAGE 2	As a large of the same of the		(ptp	
	elay shall be imp	of supplier or his her representant of his	Very truly yours	SAMON V. QUIC	COIII	
	mggunian Res di coru fy the	Date Date		Governor Designation	in case of m Nun for ma cutified con	
(In	case of Negotia	ated Purchase pursuant to Section 369 (a) of	RA 7160, this portion	on must be accom	plished.)	
Approved	1 00	n Resolution No.:	3m101000 101 131	House Suppl	- Original	
Certifie	ed Correct:	meht Property Division/Unit for file in five (5) days after conformity by the				
	Sagraf	tary to the Sanggunian		Date oil iggs	-	

00131

PURCHASE ORDER

PROVINCE OF PANGASINAN LGU

Supplier: NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP Address: URDANETA CITY, PANGASINAN TIN: 293-548-871-00000			P.O. No.: Date: 2 1 FFB 2024 Mode of Procurement: competitive bidding PR No./s 2024-01-0030									
							Gentlement:	e furnish this O	ffice the following articles subject to the ter	ms and conditions con	tained herein:	
							Place of Delivery: Umingan Community Hospital, Umingan, Pangasinan		Delivery Term : w/in 7 C.D. upon receipt of NTP			
Date of Delivery:		Payment Term: Cheque										
Stock/												
Property No.	Unit	Description	Quantity	Unit Cost	Amount							
27	PCS	CERVICAL COLLAR MEDIUM	12	1,000.00	12,000.00							
28	PCS	CERVICAL COLLAR LARGE	12	1,000.00	12,000.00							
29	PCS	CERVICAL COLLAR XL	12	1,000.00	12,000.00							
30	PCS	ARM SLING SMALL	20	180.00	3,600.00							
31	PCS	ARM SLING MEDIUM	los moo I 20 ib un	180.00	3,600.00							
32	PCS	ARM SLING LARGE	20	180.00	3,600.00							
33	PCS	ARM SLING XL	20	180.00	3,600.00							
34	PCS	CHART CASE A4 SIZE	10	590.00	5,900.00							
35	PCS	INFRARED FOREHEAD THERMOMETER	20	900.00	18,000.00							
36	PCS	KELLY FORCEPS STRAIGHT 6.5"	20	130.00	2,600.00							
37	PCS	KELLY FORCEPS CURVE 6.5"	20	130.00	2,600.00							
38	PCS	WHEELCHAIR	6	5,200.00	31,200.00							
39	вох	3 CC SYRINGE	160	1,050.00	168,000.00							
(Total Amount	in Words)	PAGE 3			(Losio)							
	e:	he full delivery within the time specified a cosed on the undelivered item/s	Very truly yours HON. R.	AMON V. GU	ICO III							
	negaman Ka	2 01 0	Signature over F	Governor	Authorized Offic							
		Date		Designation	n Too batturoo							
(In ca	ase of Negotia	ted Purchase pursuant to Section 369 (a) o	of RA 7160, this portion									
Approved p		Resolution No.:	or similaring your reli	Qque am et	Griginal.							
Certified	Correct:											

00131

PURCHASE ORDER

PROVINCE OF PANGASINAN LGU

Address : URDA	NETA CITY PAN		P.O. No. : 2 1 FFB 2024				
	Address: URDANETA CITY, PANGASINAN			Mode of Procurement competitive bidding			
TIN: 293-548-871-00000			PR No./s 2024-01-0030				
Gentlement:		office the following articles subject to the ter	ished as follows:	grac Son od Ha	de mot en l		
Place of Deliver	y : Umingan Con	nmunity Hospital, Umingan, Pangasinan	_ Delivery Term	The second second	receipt of NTP		
Date of Delivery:		Payment Term: Cheque					
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	000 Amount		
40	вох	5 CC SYRINGE	160	1,145.00	183,200.00		
41	вох	1 CC SYRINGE	120	1,340.00	160,800.00		
42	вох	INSULIN SYRINGE, 1 ML	80	1,600.00	128,000.00		
43	вох	DISPOSABLE NEEDLE G. 26	60	325.00	19,500.00		
44	вох	IV CATHERTER G. 18	20 10 20	9,500.00	190,000.00		
45	вох	IV CATHERTER G. 20	40	9,500.00	380,000.00		
46	вох	IV CATHERTER G. 24	20	9,500.00	190,000.00		
47	вох	IV CATHERTER G. 26	20	12,000.00	240,000.00		
48	PACKS	CUTTING NEEDLE SMALL (6X14)	40	340.00	13,600.00		
49	PACKS	CUTTING NEEDLE SMALL (9X28)	40	340.00	13,600.00		
50	PCS	OXYGEN CANNULA (NEONATE)	200	95.00	19,000.00		
51	PCS	OXYGEN CANNULA (PEDIA)	200	65.00	13,000.00		
52	PCS	OXYGEN CANNULA (ADULT)	1000	62.00	62,000.00		
	It this stand	THE POLICE AND ADDRESS OF THE PROPERTY OF THE POLICE AND ADDRESS OF TH	The state of the s	and the same of th			
(Total Amoun		PAGE 4	ague sel to domina	no touth (1/10) o	f and percent for		
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In case of favery day of del	ailure to make lay shall be imp	the full delivery within the time specified a cosed on the undelivered item/s ANNAMIKATED PLOPEZ For Printed Name of Supplier 2 - 21 - 21	Very truly yours HON. RA Signature over l	Mon v. gu	Д ісо ін		
In case of favery day of del	ailure to make lay shall be imp	the full delivery within the time specified a cosed on the undelivered item/s ANNAMIKATED PLOPEZ For Printed Name of Supplier 2 - 21 - 21	Very truly yours HON. RA Signature over I	AMON V. GU	ICO III Authorized Office		
In case of favorery day of del	signature ov	the full delivery within the time specified a cosed on the undelivered item/s ANNAMICHAEL PLOPEZ The Printed Name of Supplier 2 - 21 - 24 Date The property of the proper	Very truly yours HON. RA Signature over I	AMON V. GU Printed Name of Governor Designatio	Authorized Office		
In case of favorery day of del	signature over Sanggunian	the full delivery within the time specified a cosed on the undelivered item/s ANNAMIKAEU PLOPEZ The Printed Name of Supplier 2 - 21 - 24 Date The printed Purchase pursuant to Section 369 (a) of the section 369 (b) of the section 369 (c) of the section 369 (d) of the sec	Very truly yours HON. RA Signature over I	AMON V. GU Printed Name of Governor Designatio	Authorized Office		
In case of fievery day of del Conform Lavorque (In c	signature over Sanggunian	the full delivery within the time specified a cosed on the undelivered item/s ANNAMICAEUR LOPEZ The Printed Name of Supplier 2 - 21 - 24 Date The Purchase pursuant to Section 369 (a) of the Resolution No.:	Very truly yours HON. RA Signature over I	Governor Designation Designation	Authorized Officent		

PURCHASE ORDER

PROVINCE OF PANGASINAN LGU

Supplier: NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP Address: URDANETA CITY, PANGASINAN TIN: 293-548-871-00000			P.O. No.: Date: 2 1 FEB 2024 Mode of Procurement: competitive bidding			
			PR No./s 2024-01-0030			
Gentlement: Pleas	se furnish this O	ffice the following articles subject to the terms a	and conditions con	ntained herein:	da morale 18.	
Place of Delivery : Umingan Community Hospital, Umingan, Pangasinan		Delivery Term : w/in 7 C.D. upon receipt of NTP				
Date of Delivery	ate of Delivery:		Payment Term: Cheque			
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount	
53	PCS	OXYGEN MASK (PEDIA)	100	95.00	9,500.00	
54	PCS	SUCTION CATHERTER FR. 5	20	30.00	600.00	
55	PCS	SUCTION CATHERTER FR. 14	20	30.00	600.00	
56	PCS	SUCTION CATHERTER FR. 8	20	30.00	600.00	
57 149100	PCS	SUCTION CATHERTER FR. 18	20	30.00	600.00	
58	PCS	SUCTION CATHERTER FR. 20	20	30.00	600.00	
59	вох	IFC FR. 16	20	750.00	15,000.00	
60	BOX	IFC FR. 12	20	750.00	15,000.00	
61	BOX	IFC FR. 14	2	750.00	1,500.00	
62	вох	CHROMIC 4-0	por 10 red ba	1,020.00	10,200.00	
63	вох	CHROMIC 2-0	20	1,020.00	20,400.00	
64	вох	BOX COTTON THREAD 3-0, (12 SPOULES X 1 BOX)	rytrog ad Sporty	3,600.00	21,600.00	
65	вох	CORD CLAMP (100 PCS X 1 BOX)	2	950.00	1,900.00	
(Total Amoun	in merconord	PAGE 5	ddus am in ma	HICHBYROHE TOTAL	ALL SHEET ALL OF	
	sy shall be imp		Very truly yours HON. R Signature over	AMON V. GU	Authorized Offici	
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PURCHASE ORDER PROVINCE OF PANGASINAN

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TIN: 293-548-871-00000			Mode of Procurement: 2024-01-0030 PR No./s			
entlement: Pleas		fice the following articles subject to the ter	5. I his form shall be accomplished as follows.			
ace of Delivery : Umingan Community Hospital, Umingan, Pangasinan ate of Delivery :		Delivery Term : Cheque Payment Term:				
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount	
66	ROLL	COTTON ROLL 400 GMS	40	285.00	11,400.00	
67	PCS	ENDOTACHEAL TUBE FR. 3	20	149.00	2,980.00	
68	PCS	ENDOTACHEAL TUBE FR. 7.5	40	149.00	5,960.00	
69	PCS	ENDOTACHEAL TUBE FR. 4	10	149.00	1,490.00	
70	PCS	ENDOTACHEAL TUBE FR. 6	10	149.00	1,490.00	
71	PCS	ELASTIC BANDAGE 2 X 5	60	40.00	2,400.00	
72	PCS	ELASTIC BANDAGE 4 X 5	40	85.00	3,400.00	
73	PCS	FEEDING TUBE FR. 6	20	25.00	500.00	
74	PCS	FEEDING TUBE FR. 8	40	25.00	1,000.00	
75	ROLL	LEUKOPLAST ROLL	20	1,128.58	22,571.60	
	BOX	LUBRICATING JELLY 150 GMS	40	275.00	11,000.00	
76 77	AMP	TETANUS ANTI TOXIN (ATS)	8000	195.00	1,560,000.00	
11	AMP	TETANOS ANTI TOMIN (1115)	4000	120.00	480,000.00	
70	AMD	TETANLIS TOXOID	4000	120.00	The state of the s	
78 Total Amoun		PAGE 6	ont of the supplies	in Lot measurers	Tir Conic concerns	
Total Amoun In case of fa	t in Words) milure to make the ay shall be imposed to the imposed	page 6 The full delivery within the time specified a posed on the undelivered item/s The full delivery within the time specified a posed on the undelivered item/s	Very truly yours	ne-tenth (1/10) of o	4.	
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In case of fevery day of del Conform (In case of Approved p	ailure to make the ay shall be imposed in the state of Negotiate asset of Negotiate	PAGE 6 The full delivery within the time specified a posed on the undelivered item/s CHAELA PLOPEZ The Printed Name of Supplier - 21 - 24 Date The Purchase pursuant to Section 369 (a) of the printed Name of Supplier of the purchase pursuant to Section 369 (a) of the purchase pursuant to Section 369 (b) of the purchase pursuant to Section 369 (c) of the purchase purs	Very truly yours HON. Signature over 1	RAMON V. GW Printed Name of Au Governor Designation	ICO III uthorized Offici	

PURCHASE ORDER PROVINCE OF PANGASINAN

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Supplier: NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP URDANETA CITY, PANGASINAN 293-548-871-00000			P.O. No.: 0 1 3 1 Date: competitive bidding Mode of Procurement: PR No./s 2024-01-0030			
Gentlement:			PK No./S 2027-02-0030			
	furnish this Of	fice the following articles subject to the ter	ms and conditions con	tained herein:		
lace of Delivery: Umingan Community Hospital, Umingan, Pangasinan			Delivery Term : W/In 7 C.D. upon receipt of NIP			
Date of Delivery	re of Delivery :		Payment Term:	IN .UN		
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount	
79	VIAL	VACCINE 1ML WHO PREQUALIFIED	1200	2,400.00	2,880,000.00	
. 80	VIAL	EQUINE ANTI RABIES SERUM	400	1,700.00	680,000.00	
81	вох	X-RAY FILM 14 X 17	12	9,764.00	117,168.00	
82	вох	X-RAY FILM 14 X 14	12	8,375.00	100,500.00	
83	вох	X-RAY FILM 11 X 14	12	4,705.00	56,460.00	
84	вох	X-RAY FILM 10 X 12	12	4,717.00	56,604.00	
85	PACKS	X-RAY ENVELOPE 14 X 17	12 P. 12	1,800.00	21,600.00	
86	PACKS	X-RAY ENVELOPE 14 X 14	V. 1100 12 12	1,008.00	12,096.00	
87	PACKS	X-RAY ENVELOPE 11 X 14	12	1,500.00	18,000.00	
. 88	GAL	X-RAY SOLUTION DEVELOPER MANUAL	12	5,115.08	61,380.96	
89	GAL	X-RAY SOLUTION FIXER MANUAL	12	2,017.00	24,204.00	
90	BOX	FC FR. 14 Uq ed of aboog and to te	ock pgapenty as mil	750.00	1,500.00	
		XXXXX - XXXXX	- / dinU\nois	or Property Divi		
esparation, 46	pieve, roil, pe	Twenty-Three Million Nine Hundred Forty-Three		measurem	9,727,754.56	
(Total Amount	iii words)	Seventy-Nine Pesos and 82	edno sup dostano de o	C20 17 10 1000	William I	
	e:	ne full delivery within the time specified a posed on the undelivered item/s	Very truly yours	4-4	14. Caused 13. Aignar 216. Pendu	
her approval		INTELNITION TO THE PROPERTY OF	HON. RAMON V. GUICO III Signature over Printed Name of Authorized Office			
		er Printed Name of Supplier			uthorized Official	
	the the	Date Date	ed Sunggunian app	Designation	im and mu?	
(In ca	ise of Negotiat	ed Purchase pursuant to Section 369 (a) o	f RA 7160, this portion	on must be accom	plished.)	
Approved p		Resolution No.:		To the Suppl	-Original -	
Certified	Correct:				Capri 2 Corl 3	
		ry to the Sanggunian		ate		