PURCHASE ORDER
CITY OF CALAPAN

Supplier	: **POLYCARE PHARMACY**	P.O No.	: 0527
Address	: Puerto Galera	Date	: 07.14.25
		Mode of Procurement	: small value
TIN	: 323-571-231	PR No./s:	0363

Gentlemen:

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

Place of Delivery	: CHSD	Delivery Term:	FOB Destnation
Date of Delivery	: within 30 days upon receipt of P.O.	Payment Term:	N/60

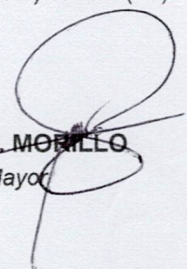| Stock/ Property No.	UNIT	ITEM & DESCRIPTION	QTY.	UNIT COST	TOTAL COST
		Lot 1: Assistive Devices and medical Equipment			
1	pcs	Wheel Chair	20	6,795.00	135,900.00
2	pcs	Quad cane	2	1,195.00	2,390.00
		TOTAL			138,290.00

(Total Amount in Words): **One hundred thirty eight thousand two hundred ninety pesos only**

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

Very Truly yours,

MARILOU F. MORILLO
City Mayor

Conforme:

POLYCARE PHARMACY
Signature Over Printed Name of Supplier

Date

(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: Date: _____
                Secretary to the Sanggunian

PO 2021 v.0