

Republic of the Philippines  
 PROVINCE OF SOUTHERN LEYTE  
 City of Maasin

**PURCHASE ORDER**  
 Provincial Government of southern Leyte  
 Agency/Procuring Entry

|  |                           |
|--|---------------------------|
| Supplier : <b>LEAN MEDICAL AND SURGICAL SUPPLY</b> | P.O. No. : <b>0614</b>    |
| Address : Cebu City                                | Date : <b>DEC 15 2021</b> |
| Tel.No. :  | Mode of Procurement:      |
| TIN :  | Small Value Procurement   |
|  | PR. No./s: <b>0835</b>    |

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

Place of delivery: PGSO  
 Date of Delivery: 20 calendar days

| Item No.        | UNIT | QTY | DESCRIPTION   | UNIT COST | AMOUNT     |
|-----------------|------|-----|---|-----------|------------|
| 1               | vial | 145 | Anti-Rabies Vaccine, Active Purified Rabies Vaccine<br>0.5ml solvent freeze-cried power for injection | 2,449.00  | 355,105.00 |
| 2               | vial | 50  | Anti-Rabies Vaccine Passive Equine Rabies immunoglobulin<br>1,000 IU/VIAL                             | 2,054.00  | 102,700.00 |
| 3               | box  | 24  | Insulin Syringe 1cc, 100 pcs/box  | 1,580.00  | 37,920.00  |
| For use in M3BL |      |     |   |           |            |

OFFICE OF THE PROVINCIAL AUDITOR  
 RECEIVED  
 DATE: 12/15/21  
 BY: [Signature]  
 MAASIN, SOUTHERN LEYTE

PGSO  
 RECEIVED BY  
 FLOWLINE  
 NAME  
 12/15/21  
 DATE

Note: Please see terms and conditions at the back **495,725.00**

(Total Amount in Words) FOUR HUNDRED NINETY FIVE THOUSAND SEVEN HUNDRED TWENTY FIVE 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 of everyday of delay shall be imposed.

Conforme:

|  |   |
|--|---|
| Signature Over Printed Name of Supplier<br>[Signature]<br>Date <b>12-15-21</b> | <b>DAMIAN G. MERCADO</b><br>Provincial Governor<br>Authorized Official<br>[Signature] |
|--|---|

(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