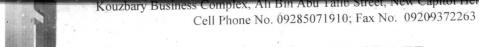


PURCHASE ORDER

Supplier	. R0	OSE PHA	RMACY INC.	Purchase Order No. :	MM-14+
Address	· II.	IGAN CIT	Y	Date :	9/15/2121
Tel/Fax				Terms of Payment :	
		RVP-004-2	2021	Mode of Procurement:	NP/SVP
PR No.	_	5/2021			
Date			The state of the s		100
Please del	iver to th	is Office v	within seven (7) working days from receipt hereof the following:		
NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE I	OTAL AMOUNT
1	7	bot	DISINFECTANT SPRAY, CRISP LINE SCENT 170g, lysol	402.00	2,814.00
1	1	501	XXXXXX NOTHING FOLLOWS XXXXX		
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3/1			TOTAL		2,814.00
2. Rende 3. If the date of th 4. For in tax recei	as liquider your bidate of the approvement of the a	lated dama ills in tripl me receipt of val of the P tems, IMP ld be subm in the amo	icate copies including the original. of the Purchase Order by the dealer is not indicated, it shall be deemed furchase Order. ORTATION DOCUMENTS specifically showing the condition, serial integration by the supplier	I received on the 10th wall numbers of the equipours,	vorking day from the
			DATU MASIDING M. ALONTO, JR. Regional Vice-President		
Receive	d this P.C). Copy on	: Conf	form:	/
		by:		X	
		PV			Signature of Representative



PURCHASE ORDER

Supplier	. RO	OSE PHA	RMACY INC.	Purchase Order No. :	2121-147
Address	. —	IGAN CIT	Y	Date :	9/15/2121
	. 11	IGAN CIT	Terms of Payment	1	
Tel/Fax		RVP-004-2	021	Mode of Procurement	NP/SVP
PR No.	_		021		
Date		6/2021	W.		
Please del	iver to th	is Office w	rithin seven (7) working days from receipt hereof the following:		
NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	7	bot	DISINFECTANT SPRAY, CRISP LINE SCENT 170g, lysol	402.00	2,814.00
1	+	500	XXXXXX NOTHING FOLLOWS XXXXX		
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			TOTAL		2,814.00
2. Render 3. If the date of the 4. For integral tax receipts	as liquider your bedate of the approvement of the a	dated dama, ills in tripli he receipt of val of the P items, IMP ld be subm in the amo	cate copies including the original. of the Purchase Order by the dealer is not indicated, it shall be deeme urchase Order. ORTATION DOCUMENTS specifically showing the condition, seriouted by the supplier Out of: D. ASHARY D. ASHARY D. ASHARY D. ASHARY D. ASHARY	d received on the 10th value all numbers of the equiparts,	working day from the
			Approved: DATU MASIDING M. ALONTO, JI Regional Vice-President	<u>.</u>	
Received	d this P.C	O. Copy on by:	: Con	nform:	nd Signature of
					Representative