



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
Akia Bldg. Old De Venecia Highway, Lucao, Dagupan City

PURCHASE ORDER

POMM-P-006

OFFICE/DEPARTMENT: ADMINISTRATIVE SECTION, GENERAL SERVICE UNIT

Supplier: **NORTHERN LUZON DRUG CORPORATION**
Address: **Lioanag Bldg., Perez Blvd., Dagupan City, Pangasinan**
Tel.Fax No.: **0906-362-8668**
Supplier Registered with: **004-021-156-003 V**

PO No. **2023_051**

Date: **5/22/2023**

Terms of Payment: **Charge**

Mode of Procurement: **Negotiated Procurement-
Small Value Procurement**

Please deliver to this office within 7-15 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	70	tab	Antacids Aluminum Hydroxidemagnesium Hydroxidesimeticone	7.75	542.50
2	37	tab	Antivertigo Betahistine Dihydrochloride 16mg	70.75	2,617.75
3	23	tab	Ace Inhibitors Captopril 50mg	12.00	276.00
4	30	cap	Pain Reliever Celecoxib 400mg	57.25	1,717.50
5	30	tab	Antihypertensive Clonidine Hydrochloride 75mg	32.25	967.50
6	81	cap	Penicillins Cloxacillin 500mg	17.00	1,377.00
7	33	cap	Antibiotics Doxycycline 100mg	97.75	3,225.75
8	1	tube	Topical Corticosteroids Hydrocortisone 10mh/g cream	332.00	332.00
9	122	cap	Nsaids Ibuprofen 500mg	12.00	1,464.00
10	15	cap	Antidiarrheals Loperamide 2mg	7.50	112.50
11	90	tab	Antihistamine Loratadine 10mg	23.25	2,092.50
12	63	caplet	Nsaids Mefenamic Acid 500mg	4.75	299.25
13	60	tab	Anti-Diabetes Metformin 500mg	3.50	210.00
14	10	ampule	Antiemetic Metoclopramide Chloride 10mg/2ml (Parenteral I.M.)	103.75	1,037.50
15	1	tube	Topical Antibacterial Mupirocin ointment 5g	379.00	379.00
16	20	cap	Antacids Omeprazole 20mg	38.50	770.00
17	161	tab	Antipyretics Paracetamol 500mg	4.00	644.00
18	2	pc	Medical Plaster Plaster; Hypoallergenic	70.25	140.50
19	1	tube	Topical Antibacterial Polymyxin B Sulfate + Bacitracin Zinc + Neomycin	320.75	320.75
20	20	tab	Antacids Ranitidine 150mg	20.00	400.00
21	60	dragees/ tab	Other Drugs Acting on the Respiratory System Sinupret	12.25	735.00
22	1	bot	Respiratory Stimulant Spirit of Ammonia 60ml	31.75	31.75
23	20	tab	Antiasthmatic Terbutaline Sulfate 2.5mg	17.25	345.00
24	139	cap	Cough and Cold Preparations Vitex Negundo L. Lagundi Leaf 600mg	7.00	973.00
	40	tab	Oral Antispasmodic Hyoscine-N Butylbromide 10mg	30.00	1,200.00
	15	tab	Nsaids Naproxen Sodium 550mg	23.00	345.00
xxxx Nothing Follows xxxx				TOTAL	22,555.75
Less: VAT (5%/1.12)					1,006.55
EWT (1%/1.12)					201.9
PR No. 23-0515-0174 (50203070)					
PURPOSE: Drugs & Medicines for PRO 1 use/ From APP Amendment Batch 4				TOTAL - NET	21,347.41

Terms & Conditions:

- In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent (1%) for every day of delay shall be
- For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts should be
- The contracting parties undertake to comply with Office Order No. 0018-2015 entitled "Reiteration of PhilHealth No Gift Policy (Revision 1) which is deemed
- PhilHealth shall have the right to reject and return the items and cancel the corresponding PO if goods delivered are defective, incomplete or non-compliant as
- In case of returned/rejected items which cannot be replaced within seven (7) calendar days from notice, PhilHealth shall demand full refund of payment made
- Deliveries should be made within 8:00AM - 12:00NN and 1:00PM - 3:00PM on working days on or before the date stipulated in the PO.

Very truly yours,

CYNTHIA S. SANTOS
Division Chief IV / MSD Chief

BY THE AUTHORITY OF the Budget

AYKIMP. AQUINO for

FC II

Certified Budget Available:

Funds Available in the amount of:

22,555.75

JOSE A. MONES

Fiscal Controller III

EDWARD Q. ESPIRITU

AO IV / OIC-OFMS Chief

By the Authority of the FMS Chief

JOSE A. MONES

Fiscal Controller III

With in the COB:

2023

Expense Code:

50202070

Bdget:

P22,555.75

Remarks:

VARIOUS COST CENTERS

Conforme:

MICHAEL SAMPSON

ISM

Date:

05/24/23

Signature over Printed Name and Position of Authorized Representative

APPROVED:

DENNIS B. ADRE

Regional Vice President, PRO1

Date

COMMISSION ON AUDIT
AUDIT TEAM R1-04 (PHIC Group)



MAY 24 2023

RECEIVED BY:

[Signature]