



Republic of the Philippines
DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
BUREAU OF JAIL MANAGEMENT AND PENOLOGY
NATIONAL HEADQUARTERS
144 Mindanao Avenue, Project 8, Quezon City
Email Address: chiefbjmp@bjmp.gov.ph Website: www.bjmp.gov.ph
Trunklines: (+632) 927-6383; 927-5505



Appendix 61

PURCHASE ORDER

Bureau of Jail Management and Penology - National Headquarters

Entity Name

Supplier : Pharmazel Incorporated	P.O. No. : 20-11-025
Address : #71 K-6th Street East Kamias Quezon City	Date : November 18, 2020
TIN : 003-881-456-000	Mode of Procurement : 53.9. Nego - SVP

Gentlemen:

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


Place of Delivery : BJMP-NHQ, 144 Mindanao Ave., Project 8, Quezon City	Project Duration : 10 CD upon the receipt of PO
Date of Delivery : _____	Payment Term : _____

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
	gallons	Isopropyl Alcohol 70% 500ml/bottle	30	498.00	14,940.00
	boxes	Band Aide Strip (Mediplast)	2	99.00	198.00
	box	10 cc Syringe w/ Needle 100's/box	1	499.00	499.00
	pieces	Voltaren Gel	10	299.00	2,990.00
	bottles	Povidone Iodine 120ml/bottle	10	84.00	840.00
	bottles	Aromatic Spirit of Amonia 120ml	5	48.00	240.00
	pieces	Hot & Cold Pack	5	149.00	745.00
	box	Sterile Gauge 4x4 100's/box	2	499.00	998.00
	packs	Cotton Balls	5	59.00	295.00
	pieces	Elastic Bandage Size 4"	10	199.00	1,990.00
	pieces	Elastic Bandage Size 6"	10	199.00	1,990.00
	pieces	Hydrogen Peroxide 120ml	10	79.00	790.00
	boxes	Gloves Large Size	2	299.00	598.00
	pieces	Abocath g2l	5	149.00	745.00
	packS	3M Steri Strip 1/4 x 3"	2	599.00	1,198.00
	bottle	Lidocaine HCl 2% Solution 50ml	1	109.00	109.00

Subtotal 29,165.00

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:


ABBA IRIS E. LABORDO
Signature over Printed Name of Supplier

Dec. 09, 2020
Date


Very truly yours,


ALLAN S. IRAL, CESE

Jail Director

Chief, BJMP
(Authorized Official)

Fund Cluster : _____
Funds Available : _____


ROMELYN L. MEDINA, CPA
OIC, Accounting Service Office
Signature over Printed Name of Chief Accountant/Head of
Accounting Division/Unit

ORS/BURS No. : _____
Date of the ORS/BURS: _____

Amount : _____






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Gentlemen: Please furnish this Office the following articles subject to the terms and conditions contained herein:					
Place of Delivery : BJMP-NHQ, 144 Mindanao Ave., Project 8, Quezon City		Project Duration : 10 CD upon the receipt of PO			
Date of Delivery : _____		Payment Term : _____			
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
		DENTAL SUPPLIES			
	boxes	Gloves Small Size (non-powdered)	3	498.00	1,494.00
	box	Gloves Medium Size (non-powdered)	3	99.00	297.00
	box	Gloves Large Size (non-powdered)	3	298.00	894.00
	boxes	Face Mask	50	30.00	1,500.00
	box	Dental Anesthesia 50's/box (Hizon)	1	1,498.00	1,498.00
	bottles	Debacterol 1.5ml	2	648.00	1,296.00
	bottles	Hexetidine (Bactidol) 60ml/ bottle	20	108.00	2,160.00
	rolls	Cling Wrap 12x300mm	2	348.00	696.00
	bottles	Disinfectant Spray (Solbac) 400g	10	598.00	5,980.00
	gallon	Cidex Solution	1	1,995.00	1,995.00
	packs	Disposable cups, 8 oz x 50's/ pack	5	49.00	245.00
	pcs	Tissue Roll	10	28.00	280.00
				Subtotal	18,335.00
				Subtotal	29,165.00
(Total Amount in Words) Forty-Seven Thousand Five Hundred Pesos					47,500.00
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:		Very truly yours,			
					
ABBA IRIS F LABORDO		ALLAN S IRAL, CESE			
Signature over Printed Name of Supplier		Jail Director			
Dec. 09, 2020		Chief, BJMP			
Date		(Authorized Official)			
Fund Cluster : _____		ORS/BURS No. : 2020-11-2022			
Funds Available : _____		Date of the ORS/BURS: 11/25/20			
		Amount : P47,500. -			
ROMELYN L MEDINA, CPA					
OIC, Accounting Service Office					
Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit					