



PURCHASE ORDER

PROVINCIAL GOVERNMENT OF DAVAO DEL SUR
Mati, Digos City

Supplier: **ECE MARKETING** P.O. No.: **G-103-23CB**
 Address: **150-5th A St Ecoland Phase 1, Matina, Davao City** Date: **JUL 08 2023**
 Email/Te/#: **marife_mamale@yahoo.com / 297-5606** Mode of Procurement: **Competitive Bidding**

T.I.N.: **155-451-157-000** End-User: **PHO**
 PR. No./Date: **0526-CB-23 03/31/2023**

Gentlemen:

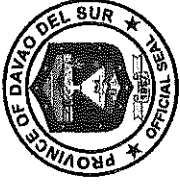
Please furnish this office the following articles subject to the terms and conditions contained herein:
 Place of Delivery: **PGSO Warehouse** Delivery Term: **FOB Destination**
 Date of Delivery: **Within 10 calendar days upon receipt of P.O.** Payment Term: **Credit Basis**

Item No.	Unit	Item and Description	Brand Name (if Applicable)	Qty	Unit Cost	Total Cost
					BY LOT	4,765,000.00
1.1	VIAL	ADENOSINE 3mg/ml, 2ml vial	ADESAN or CARDIOSINE	20		
1.2	BOT	ALBUMIN, HUMAN 25%, 50ml bot	ALBUMINAR or ZENALB	10		
1.3	AMP	AMIODARONE 50mg/ml, 3ml amp	CORDARONE or RYTHMA	50		
1.4	AMP	AMINOPHYLLINE 25mg/ml, 10ml amp	AMINOSOL or AINOFIL	200		
1.5	VIAL	AMPICILLIN + SULBACTAM 500mg + 250mg vial	AMSUMED or SULBACIN	500		
1.6	VIAL	AMPICILLIN + SULBACTAM 1000mg+500mg vial	UNAZEUS or MIASYN	600		
1.7	VIAL	AMPICILLIN 250mg Powder for Injection vial	REYOUNG or KARNATAKA	1000		
1.8	VIAL	AMPICILLIN 500mg Powder for Injection vial	REYOUNG or INJECTCARE	2500		
1.9	VIAL	AMPICILLIN 1g Powder for Injection vial	REYOUNG or INJECTCARE	2000		
1.10	AMP	ASCOBIC ACID (VITAMIN C) 250mg/ml, 2ml Solution for Injection amp	TATIO-CEE or TIANJIN PHARMA	50		
1.11	AMP	ATROPINE SULFATE 1mg/ml, 1ml Solution for Injection Amp	HIZON or ATROPAN	500		
1.12	AMP	BUPIVACAINE HCl 0.5%, 4ml(spinal) w/ 8% dextrose amp (HEAVY)	SENSORCAINE	500		
1.13	AMP	BUPIVACAINE ISOBARIC 0.5%, 5ml amp	SENSORCAINE	40		
1.14	AMP	CALCIUM GLUCONATE 10%, 10ml amp	CALCILYTE or EUROMED	300		
1.15	AMP	CARBOPROST 250mcg/ml, 1ml amp	CELON LAB or BHARAT SERUMS	100		
1.16	VIAL	CEFAZOLIN 1g Powder for Injection vial	PHIZOLIN or HARBIN	800		
1.17	VIAL	CEFEPIME 1g vial	ZEPIME or MAXEF	500		
1.18	VIAL	CEFTRIAXONE 1g + 10ml diluent vial	SITXON or CEZOX	3000		
1.19	VIAL	CEFOXITIN 1g Powder VIAL	XITIN or ENDURE	800		
1.20	VIAL	CEFUROXIME 750mg vial	ZINACARE or EXECORE	2000		
1.21	VIAL	CEFTAZIDIME 1G Powder for Injection vial	CEFTRAZISAPH or ZEFACARE	1000		
1.22	AMP	CLINDAMYCIN 150mg/ml, 4ml Solution for Injection amp	AMSOCYN or NORTH CHINA	1000		
1.23	VIAL	CHLORAMPHENICOL 1g vial	PHARMA	30		
1.24	VIAL	DEXAMETHASONE 4mg/ml, 2ml vial	KLORFEN or 2 WORLD	1000		
1.25	AMP	DOBUTAMINE 50mg/ml, 5ml Solution for Injection AMP	DEXASAN or DEXTICORT	100		
			SWISS or DOBUBAX			

Reminder: **Delivery shall be made not later than 12:00 noon**
 Total Amount in words: **Four Million-Seven Hundred Sixty Five Thousand Pesos** TOTAL **4,765,000.00**

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

Conforme **Manager M Mamile** Very truly yours
ECE MARKETING **YVONNE ROÑA CAGAS**
 Signature over Printed Name / Date **As per MOA**
 Date **7/17/2023**
 C/FOA No. **5469 - 1-27-10** **7/16/23** CHRISTOPHER TIAN
 Funds Available **PHO-2023-0580**



PURCHASE ORDER
PROVINCIAL GOVERNMENT OF DAVAO DEL SUR
Mati, Digos City

Supplier: **ECE MARKETING** P.O. No.: **G-103-23CB**
 Address: **150-5th A, St Ecoland Phase 1, Matina, Davao City** Date: **July 17 2023**
 Email/Tel#: **marife_mamale@yahoo.com / 297-5606** Mode of Procurement: **Competitive Bidding**

T.I.N: **155-451-157-000** End-User: **PHO**
 PR. No./Date: **0526-CB-23 03/31/2023**

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Item No.	Unit	Item and Description	Brand Name (if Applicable)	Qty	Unit Cost	Total Cost
1.26	AMP	EPINEPHRINE (Adrenaline) 1mg/ml, 1ml Solution for Injection amp	EPIBBAS or HIZON	800		
1.27	AMP	GENTAMICIN 40 mg/ml, 2ml amp	GENTACARE or GENTAM	700		
1.28	AMP	HALOPERIDOL 5mg/ml, 1ml amp	SEREDOL or HALDOL	100		
1.29	AMP	HYDRALAZINE 20mg/ml, 1ml amp	APREZOBAS or PHIL	200		
1.30	VIAL	HYDROCORTISONE 500mg powder vial	PHARMAWEALTH	200		
1.31	VIAL	HYDROCORTISONE 250mg powder vial	UMEDICA or AMSON	200		
1.32	VIAL	HYDROCORTISONE 100mg powder vial	UMEDICA or AMSON	300		
1.33	AMP	HYOSCINE-N-BUTYLBROMIDE 20mg/ml, 1ml amp	FRIENDS PHARMA or UMEDICA	1500		
1.34	VIAL	IMMUNOGLOBULIN, TETANUS (HUMAN) 250 IU/ml, 1ml Solution for Injection Pre-filled Syringe	JAYSON PHARMA or ZHEJIANG	800		
1.35	VIAL	INSULIN, Biphasic Isophane Human 70/30 (recombinant DNA) 100 IU/ml, 10ml vial	TETAGAM or IG TETANO	30		
1.36	BOT	ISOFLURANE, 100ml Volatile Liquid for Inhalation Bot.	INGUGET	6		
1.37	AMP	KETOROLAC 30mg/ml, 1ml Solution for Injection amp	FLORANE or ISORANE	2000		
1.38	VIAL	LIDOCAINE HCl 2%, 50ml vial	KETOROBAS or KETOPANE	200		
1.39	polyamp	LIDOCAINE HCl 2%, 5ml polyamp	EUROCAINE or LOCAINE	1000		
1.40	AMP	MAGNESIUM SULFATE 500mg/ml, 2ml Solution for Injection amp	EUROCAINE or SENZITINE	1000		
1.41	VIAL	METRONIDAZOLE 5mg/ml, 100ml vial	HIZON or ATLANTIC	1000		
1.42	AMP	METOCLOPRAMIDE 5mg/ml, 2ml Solution for Injection amp	ANTIZOAL or ANEROBIZOL	500		
1.43	VIAL	MEROPENEM 1g vial	METO or CLOMITENE	600		
1.44	AMP	NEOSTIGMINE 500mcg/ml, 1ml amp	UNI MEDICO or MEROSAPH	50		
1.45	AMP	NICARDIPINE 1mg/ml, 10ml amp	PROSTIGMIN or TABLETS (INDIA)	300		
1.46	AMP	NOREPINEPHRINE 1mg/ml, 10ml amp Solution for Injection AMP	CARDIONID or MAKCUR	200		
1.47	AMP	OMEPRAZOLE 40mg powder vial + 10ml solvent amp	BC WORLD or CELON	2500		
1.48	VIAL	OXACILLIN 500mg VIAL	OMCARE or ZYOM	200		
1.49	AMP	OXYTOCIN 10 IU/ml, 1ml Solution for Injection amp	REYOUNG or NORTH CHINA	1500		

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Conforme **Marife M. Mamale** Very truly yours
ECE MARKETING **YVONNE ROMA CAGAS**
 Signature over Printed Name / Date **July 17 2023**
 Date **July 17 2023**
 CAFOA No. **544917-27-161**
 Funds Available **PHOTO COPY OF THE BIDDING**
AS SET FORTH IN THE BIDDING DOCUMENTS DATED JULY 15, 2023



PURCHASE ORDER
 PROVINCIAL GOVERNMENT OF DAVAO DEL SUR
 Mati, Digos City

Supplier: **ECE MARKETING** P.O. No: **G-103-23CB**
 Address: **150-5th A. St Ecland Phase 1, Matina, Davao City** Date: **08 08 2023**
 Email/Te# : **manife_mamale@yahoo.com / 297-5606** Mode of Procurement : **Competitive Bidding**

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1.50	AMP	PARACETAMOL 150mg/ml, 2ml amp	AMADOL or AMGESIC	1500		
1.51	VIAL	PIPERACILLIN + TAZOBACTAM 4g + 500mg vial	UNI MEDICO or INJECT CARE	1500		
1.52	AMP	PROPOFOL 10mg/ml, 20ml Emulsion for Injection amp	DIPRIFOL or PROFOSOL	100		
1.53	AMP	PHYTOMENADIONE 10mg/ml, 1ml Solution amp	PHYTOBAS or DAEWON	1000		
1.54	VIAL	RABIES VACCINE CHICK EMBRYO CELL (Purified, inactivated) 2.5 IU/ml, 1dose vial+1ml diluent (ID,IM)	VAXIRAB or ABHAYRAB	60		
1.55	AMP	RANITIDINE 25mg/ml, 2ml Solution Amp	RANITEIN or ZANTRICID	1500		
1.56	VIAL	SERUM, ANTI- RABIES 200 IU/ml, 5ml Solution for Injection vial (EQUINE)	EQUIRAB or VINRAB	60		
1.57	BOT	SEVOFLURANE 250ml Volatile Liquid for inhalation BOT	SOJOURN or SHANGHAI	5		
1.58	AMP	SODIUM BICARBONATE 1meq/ml, 20ml amp	SOLUNATE or HEBEI	200		
1.59	VIAL	SUXAMETHONIUM (Succinylcholine) 20mg/ml, 10ml vial	ANEKTIL or QUELICIN	50		
1.60	AMP	TRAMADOL 50mg/ml, 1ml Solution for Injection amp	AMBIDOL or TRAMIDE	1000		
1.61	AMP	TRANEXAMIC ACID 100mg/ml, 5ml amp	HEMOBAS or CYCLOXID	1000		
1.62	AMP	VACCINE, TETANUS TOXOID 40 IU (5 Iif)/0.5ml, 0.5ml suspension for injection amp	IMATET or BIO-TT	1000		
<p>* For medicines, the packaging must bear the marking GOVERNMENT PROPERTY-PROVINCE OF DAVAO DEL SUR.</p> <p align="center">***** FOR HOSPITAL USE REQUISITION SHOULD BE BY LOT BIDDING GENERAL FUND 2023 5- 02-03-070</p> <p>The Supplier shall notify the PGSO a day before the actual delivery.</p>						

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Conforme **Manya M. Mamale** Very truly yours
 Signature over Printed Name / Date **Manya M. Mamale** Governor
 Date **03/17/2023**
 CAFOA No. **0449-7-23-10** 7/6/23 CHIEF GOVERNOR'S OFFICE
 DAVAO DEL SUR

Funds Available