



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

Supplier : **K101 PHARMA** P.O. No. : **G-125B-24CB**
 Address : **Door 4 Aala Compound Mc Arthur Highway Matina, Davao City** Date : **MAY 23 2024**
 Email/Tel# : **ivy_bs@yahoo.com/marvinsagragao@yahoo.com / 082 286-594 / 082 282-3710 / 09189859864** Mode of Procurement : **Competitive Bidding**
 T.I.N : **456** End-User : **PHO**

PR. No./Date : **0317-CB-24-AMENDED 03/27/2024**

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 15 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
LOT 3 ORALS/INJECTABLES/TOPICAL PREPARATIONS						
3.1	tablet	Ascorbic Acid (Vitamin C) 500 mg Tablet	ENOCEE/BETTER C	10000	BY LOT	640,530.00
3.2	tablet	Azithromycin 500 mg Tablet	ASCORE/AZIMED	900		
3.3	bottle	Azithromycin 200 mg/5 mL, 15 mL Oral Suspension Bottle	ZYFACT/ORABAC	300		
3.4	tube	Betamethasone 0.1%, 5 g Ointment Tube	BETNOVATE	1300		
3.5	tablet	Butamirate 50mg Modified Release Tablet	SAPHMIRATE	600		
3.6	vial	Ceftriaxone 1 g Powder for Injection Vial + 10 mL Diluent	SITIXON/HAIXONE	50		
3.7	capsule	Celecoxib 200 mg Capsule	SAPHLECOX/CELEKOP	300		
3.8	tablet	Ceftrizine 10 mg Tablet	CETICIT/ALLECUR/CETRIMAX	500		
3.9	tablet	Cinnarizine 25 mg Tablet	VERTEX/RIZINE	400		
3.10	tablet	Ciprofloxacin 500 mg Tablet	CYFROX/CIPRODIN	500		
3.11	bottle	Cotrimoxazole (Sulfamethoxazole) 400 mg + 80 mg/5 mL, 60 mL Oral Suspension Bottle	DIAZOLE	300		
3.12	tablet	Cotrimoxazole (Sulfamethoxazole + Trimethoprim) 400 mg + 80 mg Tablet	COTRIMAXOL/KATHREX	3500		
3.13	capsule	Diphenhydramine 25 mg Capsule	MUCOMED	260		
3.14	capsule	Doxycycline 100 mg Capsule	PIDCLIN/MYDOXY	1800		
3.15	tablet	Ferrous Salt + Folic Acid 60 mg elemental iron + 400 mcg Tablet	ANIFER/HEMAFER-F	1800		
3.16	capsule	Fluconazole 50 mg Capsule	MYCOZOLE/FUNZELA	200		
3.17	tube	Fusidate Sodium/Fusidic Acid 2%, 5 g Cream	FUSIFRED	700		
3.18	capsule	Gabapentin 300 mg Capsule	GABVEX/PENTINOVA	250		
3.19	tube	Hydrocortisone 1%, 10 g Cream Tube	KURT	90		
3.20	capsule	Itraconazole 100 mg Capsule	INOX	800		
3.21	tablet	Mebendazole 500 mg Tablet	DLIKHRIZVER	22000		
3.22	tablet	Metoprolamide 10 mg Tablet	METO	500		
3.23	bottle	Metronidazole 125 mg/5 mL, 60 mL Oral Suspension Bottle	AMBIDAZOL/METROZOLE	650		
3.24	tablet	Metronidazole 500 mg Tablet	METROZOLE/FLAGEX	800		
3.25	tube	Mupirocin 2%, 5 g Ointment Tube	MUPICIN/MUPIREX	300		
3.26	capsule	Ormeprazole 40 mg Capsule	OMEPRASAPHRANZOLE/INHIBTA	200		
3.27	tablet	Ondansetron 8 mg Tablet	ONZET/ONDATRIX	250		
3.28	sachet	Oral Rehydration Salts (75 - Replacement) 20.5 g Oral Powder Sachet	AMBILYTE/DEHYDROSOLIDIASOL	1200		
3.29	vial	Penicillin G Benzathine (Benzathine Benzylpenicillin) 1,200,000 units Modified Release Powder for Injection Vial	ZALPEN	200		
3.30	tablet	Vitamin B1 + Vitamin B12 + Vitamin B6 100 mg + 5 mg + 50 mcg tablet	NERVITAM/MYREVIT B	4500		
3.31	bottle	Zinc (equiv.to 20 mg elemental zinc/5mL), 60 mL Syrup Bottle	ZINLUMNERZING/IMMUNOSAPH	300		
		Charges: LGDF, 2024 5-02-03-070				
PREVENTIVE PROGRAM FOR COMMUNICABLE DISEASES						
NOTE: "EXPIRATION DATE MUST BE AT LEAST ONE (1) YEAR FROM THE DATE OF DELIVERY".						

Reminder : Delivery shall be made not later than 12:00 noon

Total Amount in words: **Six Hundred Forty Thousand Five Hundred Thirty Pesos**

TOTAL 640,530.00

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 everyday of delay shall be imposed.

GARELY J. JARVIS 2024-05-24
 K101 PHARMA

Conforme Signature over Printed Name / Date

Funds Available CAFOA No. 2024-5-24-10-1 Date 5/21/24

Very truly yours

by **AYVONNE ROÑA CAGAS**, Governor
 As per Memo No. 415 SERIES of 2024
Christopher T. Tan
CHRISTOPHER T. TAN
 PGDH-PDRRMO



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

Supplier: **K101 PHARMA** P.O. No.: G-125B-24CB
 Address: Door 4 Aala Compound Mc Arthur Highway Matina, Davao City Date: MAY 23 2024

Email/Tel#: ivy_bs@yahoo.com/marvinsagao@yahoo.com / 082 286- 594 / 082 282-3710 / 09189859864 Mode of Procurement: **Competitive Bidding**

T.I.N.: 456 End-User: PHO

PR. No./Date: **0317-CB-24-AMENDED** 03/27/2024

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 15 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
		<p>*****</p> <p>FOR PREVENTIVE PROGRAM FOR COMMUNICABLE DISEASES USE;</p> <p>The Supplier shall notify the PGSO a day before the actual delivery.</p> <p>*****</p> <p>Complete delivery shall be strictly observed by the supplier and no partial delivery shall be allowed except in meritorious cases such as fortuitous event, or by act of the Government or upon the approval of the Head of the Procuring Entity.</p>				

Reminder: **Delivery shall be made not later than 12:00 noon**
 Total Amount in words: **Six Hundred Forty Thousand Five Hundred Thirty Pesos** TOTAL 640,530.00

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
CRISTOPHER T. TAN 06-05-24
 Signature over Printed Name / Date
 K101 PHARMA

Very truly yours

YVONNE ROÑA CAGAS
 GOVERNOR
 BY AUTHORITY OF THE GOVERNOR
 AS PER MEMORANDUM NO. 45 DATED 05/23/2024
CHRISTOPHER T. TAN
 PGDH-PDRMO

Funds Available: CAFOA No. 70700-5-24-011 Date 5/21/24



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

Supplier : **K101 PHARMA** P.O. No. : **G-125B-24CB-1**
 Address : **Door 4 Aala Compound Mc Arthur Highway Matina, Davao City** Date : **MAY 23 2024**

Email/Te# : **ivy_bs@yahoo.com/marvinsagragao@yahoo.com / 082 286- 594 / 082 282-3710 / 09189859864** Mode of Procurement : **Competitive Bidding**

T.I.N : _____ End-User : **PHO**

PR. No./Date : **0317-CB-24-AMENDED 03/27/2024**

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 15 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
		LOT 3 ORALS/INJECTABLES/TOPICAL PREPARATIONS			BY LOT	1,884,922.80
3.32	bottle	Amoxicillin 250mg/5mL,60 ml Oral suspension	MOXYLOR/AXMEL/EPITREXIL	1728		
3.33	bottle	Amoxicillin 100mg/mL,10 ml Oral drops	MOXYLOR/AXMEL/EPITREXIL	1728		
3.34	capsule	Amoxicillin 250 mg capsule	MOXYLOR/AXMEL/EPITREXIL	500		
3.35	capsule	Amoxicillin 500 mg capsule	AXMEL/AMBINOX/EPITREXIL	15000		
3.36	tablet	Ascorbic Acid (Vitamin C)500 mg tablet	ENOCHEE/BETTER C	16000		
3.37	bottle	Ascorbic Acid (Vitamin C)100 mg/5mL,60ml syrup bottle	NOVACEE/MYREVIT C	720		
3.38	tablet	Calcium Carbonate,500mg tablet	AMBICAL/OSTEOFREE	162200		
3.39	bottle	Ferrous Salt(equiv.to 30 mg elemental iron)5mL,60 mL Syrup	FERLUM/DLI	1728		
3.40	tablet	Ferrous Salt(equiv. to 60 mg elemental iron) tablet	FEROSUL/FEROLEM	150000		
3.41	tablet	Lagundi(Vitex Negundo L.(Fam. Verbenaceae)300mg tablet	OPFLEMED/ASFLEM/LAGUNDEN	500		
3.42	bottle	Lagundi (vitex negundo L.(Fam. Verbenaceae) 300mg/5mL,60ml syrup Bottle	OPFLEMED/ASFLEM/LAGUNDEN	500		
3.43	vial	Lidocaine 2% 50mL Solution for injection Vial	LIDOPHIL/LOCAMINE/EUROCAINE	1000		
3.44	carpule	Lidocaine 2%,1.8ml Carpule with epinephrine	XYLODENT/JASOCAINE	1000		
3.45	capsule	Mefenamic Acid 500mg capsule	MYREFEN/MECID	15000		
3.46	tablet	Methyldopa 250mg tablet	MYDOPA/BP LOW	12000		
3.47	capsule	Nifedipine 10mg capsule	CALCIGARD	5900		
3.48	bottle	Nystatin 100,000 units/mL, 30mL Oral Suspension Bottle	MYSTIN/NYSTRIN	50		
3.49	sachet	Oral Rehydration Salt(75 Replacement)20.5 g Oral Powder Sachet	AMBILYTE/DEHYDROSOLIDIASOL	1000		
3.50	bottle	Ofloxacin 0.3%,5mL Ear Drops Bottle	OFOBIZ/CELSUS	50		
3.51	ampule	Oxytocin 10 UI/ml, 1 mL Solution for Injection Ampule	GYNETOCIN/AMBTOCYN	1000		
3.52	bottle	Paracetamol 100mg/ml,15mL Oral bottle drops	NOVAMOL/MILGESIC	1728		
3.53	tablet	Paracetamol 500 mg tablet	MILGESIC/PARA500	15000		
3.54	bottle	Paracetamol at least 120mg/5mL (125mg/5mL),60ml syrup bottle	PAR125/MILGESIC	1000		
3.55	bottle	Paracetamol 250mg/5 mL , 60 mL Oral Suspension Bottle	PARA250/MILGESIC	720		
3.56	capsule	Tranexamic Acid 500 mg capsule	TRANEXAPH/HAEMOREX/HEMSTAP	15000		
3.57	bottle	Zinc (equivalent to 10 mg elemental/ml), 15ml oral drops bottle	ZINLUM/ENERZINC	1000		
3.58	bottle	Zinc (equivalent to 20 mg elemental zinc/5ml),60ml Syrup bottle	ZINLUM/ENERZINC	1000		

Charges:
 LGDF, 2024
 5-02-03-070

MATERNAL AND CHILD HEALTH PROGRAM

NOTE: "EXPIRATION DATE MUST BE AT LEAST ONE (1) YEAR FROM THE DATE OF DELIVERY".

Reminder : **Delivery shall be made not later than 12:00 noon**
One Million Eight Hundred Eighty Four Thousand Nine Hundred Twenty Two Pesos And
Eighty Centavos **TOTAL 1,884,922.80**

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%) of one percent (1%) for everyday of delay shall be imposed.

GREAGY DYPAS 106-05-24
 Signature over Printed Name / Date
K101 PHARMA

Very truly yours
YVONNE ROÑA CAGAS
 Governor

by Authority of Governor
 As per No. 4 Series of 2024
CHRISTOPHER T. TAN
 PGDH-PDRMO

Funds Available _____ Date **5/17/24**
 CAFOA No. **2024-J-24-1011**



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

Supplier : **K101 PHARMA** P.O. No. : **G-125B-24CB-1**
 Address : **Door 4 Aala Compound Mc Arthur Highway Matina, Davao City** Date : **MAY 23 2024**

Email/Te# : **ivy_bs@yahoo.com/marvinsagragao@yahoo.com / 082 286- 594 / 082 282-3710 / 09189859864** Mode of Procurement : **Competitive Bidding**
 T.I.N : **456** End-User : **PHO**

PR. No./Date : **0317-CB-24-AMENDED 03/27/2024**

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 15 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
		<p align="center">*****</p> <p align="center">FOR MATERNAL AND CHILD HEALTH PROGRAM USE</p> <p>The Supplier shall notify the PGSO a day before the actual delivery.</p> <p align="center">*****</p> <p>Complete delivery shall be strictly observed by the supplier and no partial delivery shall be allowed except in meritorious cases such as fortuitous event, or by act of the Government or upon the approval of the Head of the Procuring Entity.</p>				

Reminder : **Delivery shall be made not later than 12:00 noon**
One Million Eight Hundred Eighty-Four Thousand Nine Hundred Twenty Two Pesos And Eighty Centavos
TOTAL 1,884,922.80

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 everyday of delay shall be imposed.

Very truly yours

Conforme **GREGORY DUPONT TORO 05-24**
K101 PHARMA
 Signature over Printed Name / Date

YVONNE ROÑA CAGAS
 by Authority of Governor
 As per Memo No. 15 Series of 2024
CHRISTOPHER T. TAN
 PGDH-PDRMO

Funds Available **CAFOA No. 2024-5-24 (01) / 5/21/24**



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

Supplier : **K101 PHARMA** P.O. No. : **G-125B-24CB-3**
 Address : **Door 4 Aala Compound Mc Arthur Highway Matina, Davao City** Date : **MAY 23 2024**

Email/Te# : **ivy_bs@yahoo.com/marvinsagao@yahoo.com / 082 286- 594 / 082 282-3710 / 09189859864** Mode of Procurement : **Competitive Bidding**

T.I.N : _____ End-User : **PHO**

PR. No./Date : **0317-CB-24-AMENDED 03/27/2024**

Gentlemen : _____

Place of Delivery : **PGSO Warehouse** Delivery Term : _____ FOB Destination

Date of Delivery : _____ Payment Term : _____ Credit Basis

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

Item No.	Unit	Item and Description	Brand Name (if Applicable)	Qty	Unit Cost	Total Cost
		LOT 3 ORALS/INJECTABLES/TOPICAL PREPARATIONS			BY LOT	2,248,270.00
3.67	tablet	Allopurinol 300mg tablet	ALLUPREX/DLI/ELAVIL	20000		
3.68	tablet	Amlodipine 10 mg tablet (filmcoated)	AMLODAC/CALCIVAS	46000		
3.69	tablet	Amlodipine 5 mg tablet (filmcoated)	AMLODAC/CALCIVAS	46000		
3.70	tablet	Ascorbic Acid (Vitamin C) 500mg tablet	ENOCEE/BETTER C	46000		
3.71	tablet	Atorvastatin 20mg tablet	ATORSAPH/TORVASTATIN	50000		
3.72	tablet	Gliclazide 30mg Modified Release tablet	ZEBET/SAPHCLAZIDE/DIAMIR	44000		
3.73	tablet	Gliclazide 60mg Modified Release tablet	SAPHCLAZIDE/MELANOV	44000		
3.74	bottle	Hypromellose 0.3%, 10mL Eye Drops Bottle	EQUISINE MOIST	600		
3.75	tablet	Losartan 50mg tablet(filmcoated)	SAPHLOR/LOSAAR	49000		
3.76	tablet	Losartan 100mg tablet (filmcoated)	SAPHLOR/LOSAAR	49000		
3.77	tablet	Metformin 500mg Film Coated tablet	SAPHORMIN/GLYCEMET	49000		
3.78	capsule	Multivitamins for Adult Capsule	MYREVIT/MULTILEM	40000		
3.79	tablet	Vitamin B1+Vitamin B12+Vitamin B6 100mg+5mg+50mcg tablet	NERVITA/MYREVIT B	46600		
<p>Charges: LGDF, 2024 5-02-03-070 NON-COMMUNICABLE DISEASE</p> <p>NOTE: "EXPIRATION DATE MUST BE AT LEAST ONE (1) YEAR FROM THE DATE OF DELIVERY".</p> <p>*****</p> <p>FOR NON-COMMUNICABLE DISEASE USE</p> <p>The Supplier shall notify the PGSO a day before the actual delivery.</p> <p>*****</p> <p>Complete delivery shall be strictly observed by the supplier and no partial delivery shall be allowed except in meritorious cases such as fortuitous event, or by act of the Government or upon the approval of the Head of the Procuring Entity.</p>						

Reminder : **Delivery shall be made not later than 12:00 noon**

Total Amount in words: **Two Million Two Hundred Forty Eight Thousand Two Hundred Seventy Pesos** TOTAL **2,248,270.00**

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 everyday of delay shall be imposed.

Conforme **GREGRY DASY 00-05-24** Very truly yours

Signature over Printed Name / Date **K101 PHARMA** **YVONNE ROÑA CAGAS**
 Date **5/21/24** Governor

Funds Available **CAFOA No. 7024-S-24-101** / **5/21/24** **CHRISTOPHER TAN** / **PGDH-PDRMO**



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

Supplier : **K101 PHARMA** P.O. No. : **G-125B-24CB-4**
 Address : **Door 4 Aala Compound Mc Arthur Highway Matina, Davao City** Date : **MAY 23 2024**

Email/Tel# : **ivy_bs@yahoo.com/marvinsagragao@yahoo.com / 082 286- 594 / 082 282-3710 / 09189859884** Mode of Procurement : **Competitive Bidding**

T.I.N : _____ End-User : **PHO**
 PR. No./Date : **0317-CB-24-AMENDED 03/27/2024**

Gentlemen :
 Place of Delivery : **PGSO Warehouse** Delivery Term : **FOB Destination**
 Date of Delivery : **Within 15 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
3.80 3.81	bottle bottle	LOT 3 ORALS/INJECTABLES/TOPICAL PREPARATIONS Paracetamol 100mg/ml,15ml oral drops bottle Ferrous Salt(equiv. to 15mg elemental iron)/0.6mL, 15 mL Oral Drops	PARA100/MILGESIC FERLUM	11240 100	BY LOT	357,787.20
3.82 3.83 3.84	bottle bottle bottle	Ferrous Salt(equiv. to 30mg elemental iron)/5 mL, 60 mL Syrup Zinc (equiv. to 10 mg elemental/mL),15 mL Oral Drops Bottle Zinc (equiv. to 20 mg elemental zinc/5 mL),60 mL Syrup Bottle Charges: LGDF, 2024 5-02-03-070 SUPPORT TO NATIONAL IMMUNIZATION PROGRAM (3.80)/NUTRITION PROGRAM (3.81-3.84) NOTE: "EXPIRATION DATE MUST BE AT LEAST ONE (1) YEAR FROM THE DATE OF DELIVERY". ***** FOR SUPPORT TO NATIONAL IMMUNIZATION PROGRAM/NUTRITION PROGRAM USE The Supplier shall notify the PGSO a day before the actual delivery. ***** Complete delivery shall be strictly observed by the supplier and no partial delivery shall be allowed except in meritorious cases such as fortuitous event, or by act of the Government or upon the approval of the Head of the Procuring Entity.	FERLUM/DLI ZINLUM/ENERZINC ZINLUM/ENERZINC	300 50 97		

Reminder : **Delivery shall be made not later than 12:00 noon**
 Total Amount in words: **Three Hundred Fifty Seven Thousand Seven Hundred Eighty Seven Pesos and Twenty Centavos** TOTAL 357,787.20

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 everyday of delay shall be imposed.
 Very truly yours

Conforme
GREGG DUFFY 106 05 24
 Signature over Printed Name / Date
K101 PHARMA
 YVONNE ROÑA CAGAS
 by Authority of the Governor
 As per Memorandum Order Series of 2024
 CHRISTOPHER T. TAN
 PGSOH-PDRMO