



PROVINCIAL GOVERNMENT OF DAVAO DEL SUR Matti, Digos City

P.O. No. : G-224-23CB LIGHT HORIZON MEDICAL SUPPLIES Supplier: Door 1, NUD Bldg., Ponciano St., Davao City Date: Address:

lighthorizon21@yahoo.com / (082) 244-

7828/09093466912/09108863245

Mode of Procurement: Competitive Bidding

Email/Tel#:

PHO

PR. No./Date

T.I.N:

10/13/2023 1544-CB-23

Gentlemen:

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

Place of Delivery: Date of Delivery:

PGSO Warehouse

Delivery Term:

End-User:

FOB Destination

Within 10 calendar days upon receipt of P.O.

Credit Basis Payment Term:

	Convery		and the same of th			
Item No.	Unit	Item and Description	Brand Name (if Applicable)	Qty	Unit Cost	Total Cost
-		LOT 1			BY LOT	760,406.25
4.4	bettle	Alcohol 70% Isopropyl 500ml	PRESTIGE/MARK'S	97	5, 20,	. 50,100.20
1.1	bottle	Alcohol 70 /6 Isopropyr Southi	& CARE/SUPREME	01		
1.2	rolls	Cotton roll 400g	HYGEEN/HEXACAR	100		
1.2	10115	Solidii 13ii 400g	E/GENERIC			
1.3	pack	Cotton Balls 300's	HYGEEN/HEXACAR	100		
	Paore		E/GENERIC			
1.4	unit	BP Apparatus (Adult Aneroid) Digital	PROHEALTHCARE/	20		
			MAXCARE/BEHEAL			
			THY		-	
1.5	gal.	Disinfectant Solution(original scent)99.90% Benzalkonium	LYSOL/MARK'S &	20		
		Chloride	CARE			
1.6	can.	Disinfectant Spray, aerosol type 510 grams	LYSOL/SOLBAC	15		
1.7	gal.	Disinfectant Concentrate 1 gal.	POWER	30		
			CLEAN/MARK'S &		-	
		2	CARE			
1.8	pack	Disposable Bib Assorted colors 100's	FIRST	30		
			AID/GENERIC	20		
1.9	pcs	Dry Sheet Adult/Underpads 31.5x 70"(peach)	GINGERMED/GENE RIC	30		
1.10	unit	Fetal Doppler(Rechargeable/Battery Operated, built-in speaker	er, ICST/SOLITAIRE	15		
		changeable probe, large LCD				
		display with back light, portable				
1.11	pack	OS 4"x4" 8ply w/X-RAY Detectable x 10's	PROHEALTHCARE/	80		
			ORMED/UNIMEX			
1.12	pcs	Oxygen Cannula Nasal (Adult)	HEXACARE/SURGI	30		
			TECH/INDOPLAS	00		
1.13	pcs	Hypo Allergenic Plaster 1inch 10 yards	HEXACARE/SURGI	30		
4.4.		Decidence leding 7.50/ polytics	TECH/3M	20		
1.14	gal.	Povidone Iodine 7.5% solution	POVIDONE/BACTICI DE/J. CHEMIE	30		
1 15	hottle	Povidone Iodine 1% Mouthwash 120mL	BETADINE/MAXI-	100		
1.15	bottle	Poyldone lodine 1% Mouthwash 120mL	AID/GENERIC	100		
1.16	pcs	Pregnancy Test 100's	SURESIGN/RIGHTS	570		
1.10	pos	Trognancy 1831 1003	IGN/TRIMERA	0,0		
1.17	box	Surgical Blade #11, 100s	SURGITECH/PART	30		
			NERS/KAI			
1.18	box	Surgical Gloves Size 8.0 50's	HEXACARE/SOLITA	30		
			IRE/SURGITECH			
1.19	box	Surgical Gloves Size 7.5 50's	HEXACARE/SOLITA	30		
			IRE/SURGITECH			
1.20	box	Surgical Gloves Size 7.0 50's	HEXACARE/SOLITA	30		
			IRE/SURGITECH			
1.21	box	Surgical Gloves Size 6.5 50's	HEXACARE/SOLITA	30		
			IRE/SURGITECH			
1.22	box	Surgical Blade No. 20 100's	SURGITECH/PART	30		
Pominda		Delivery shall be made not later than 12:00 noon	NERS/KAI			L
Reminde		penvery snan be made not later than 12.00 mon				

Reminder:

Delivery shall be made not later than 12:00 noon

2-19-23

Total Amount in

One Million Four Hundred Eighty Nine Thousand Nine Hundred Ninety Five Pesos And **Twenty Five Centavos**

TOTAL

1,489,995.25

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.

B. MO 201 Genno LIGHT HORIZON MEDICAL SUPPLIES

Very truly yours By the Authority of the Governor

ies of 2 WONNE RONA CAGAS

Governor

Signature over Printed Name / Date

5099-12-23-101-1

5/67-12-27-61-1 Date 501-12-27-6

902-12-29-10-1

Funds Available CAFOA No.

OPHER T. TAN GDH-PDRRMO

Conforme



PROVINCIAL GOVERNMENT OF DAVAO DEL SUR Matti, Digos City

P.O. No. : G-224-23CB LIGHT HORIZON MEDICAL SUPPLIES Supplier: Date: Door 1, NUD Bldg., Ponciano St., Davao City Address: lighthorizon21@yahoo.com / (082) 244-Mode of Procurement: Competitive Bidding Email/Tel#: 7828/09093466912/09108863245

End-User:

T.I.N:

PR. No./Date 10/13/2023 1544-CB-23

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

Delivery Term: **FOB Destination** Place of Delivery:

Payment Term: **Credit Basis** Date of Delivery Within 10 calendar days upon receipt of P.O.

Item No.	Unit	Item and Description	Brand Name (if Applicable)	Qty	Unit Cost	Total Cost
1.23	pcs	Spinal Needle G25	TOP	30		
1.24	pcs	Universal Connecting tube	ORMED/SIMPLEX	15		
1.25	pcs	Toothbrush for Kids	COLGATE/GENERI	4000		
b			C			
1.26	sachet	Toothpaste for Kids 20mg	COLGATE/HAPEE/U	4000		
4.07	L-10	Title Brain 1944	NIQUE GENERIC	20		
1.27	bottle	Triple Distilled Water 1 Ltr.	ACCUCARE/TRUSE	30		
1.20	set	Typing Sera Anti A & Anti B 10mL	RA	50		
1.29	set	Typing Sera Anti D 10mL	ACCUCARE/TRUSE	30		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	RA			
1.30	box	Urine Strips 4 parameter 100's	SURGITECH/INSIG	50		
			HT			
1.31	box	Medical Working Gloves Medium Powder-free 100's	HEXACARE/DR.	25		
4.22	hav	Madical Madica Clause Coroll Davides from 1001s	CARE/GLOMED HEXACARE/DR.	30		
1.32	box	Medical Working Gloves Small Powder-free 100's	CARE/GLOMED	30		
		Charges: MATERNAL AND CHILD HEALTH PROGRAM LGDF 2023 5-02-03-080 Amount: Php 760,406.25	O ANCIONES			
2.4	h-Ml-	LOT 3	PRESTIGE/MARK'S	26	BY LOT	136,191.00
3.1	bottle	Alcohol 70% Isopropyl 500ml bottle	& CARE/SUPREME	20		
3.2	pack	Cotton Balls 300's	HYGEEN/HEXACAR	16		-
0.2	paon	Solidii Build GGG	E/GENERIC			
3.3	box	Disposable Syringe 3cc 100's	HEXACARE/PROHE	8		
			ALTHCARE/COSME			
			D D	40		
3.4	pcs	Glucometer with strips 50's	SINOCARE/BEHEAL THY	40		
3.5	hov	Surrical Face Mack 2nty have of FOIs	PROHEALTHCARE/	17		
3.5	box	Surgical Face Mask 3ply box of 50's	AIRLIFE/INDOPLAS	17		
3.6	box	Working gloves Medium Powder-free 100's	HEXACARE/DR.	5		
			CARE/GLOMED			
3.7	box	Working gloves Large Powder-free 100's	HEXACARE/DR.	5		
			CARE/GLOMED	4.0		
3.8	pcs	Urine strips dipsticks 10 parameter	SURGITECH/INSIG HT	40		
3.9	pcs	BP Apparatus (Adult Aneroid)Digital	BEHEALTHY/PROH	7		
3.0	Pos	Di Apparatus (Audit Arierold)Digital	EALTHCARE/MAXC			
			ARE			
3.10	bottle	Urine Bottle 60mL	GENERIC	338		
		Charges:				
		NON COMMUNICABLE DISEASE PROGRAM				

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

Conforme

One Million Four Hundred Eighty Nine Thousand Nine Hundred Ninety Five Pesos And Total Amount in

TOTAL words: Twenty Five Centavos

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.

18. mozo Gumo LIGHT HORIZON MEDICAL SUPPLIES

WONNE RONA CAGAS Governor /

Very truly yours

1,489,995.25

PHO

Signature over Printed Name / Date

5099-12-23-60-1

ISTOPHER T. TAN 12-29-23 5/00-12-27-101-

CAFOA No. Funds Available



PROVINCIAL GOVERNMENT OF DAVAO DEL SUR Matti, Digos City

Supplier:	LIGHT HORIZON MEDICAL SUPPLIES	P.O. No. :	G-224-23CB	
Address:	Door 1, NUD Bldg., Ponciano St., Davao City	Date :	DEC 1 4 2023)	
Email/Tel# :	lighthorizon21@yahoo.com / (082) 244-	Mode of Procuren	nent : Competitive Bidding	

7828/09093466912/09108863245

PHO T.I.N: End-User:

PR. No./Date 1544-CB-23 10/13/2023 Gentlemen:

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

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

Credit Basis Payment Term: Date of Delivery: Within 10 calendar days upon receipt of P.O. Brand Name (if Applicable) **Total Cost Unit Cost** Item **Item and Description** Unit

No.	Onne		(IT Applicable)			
		LGDF 2023 5-02-03-080 Amount: Php 136,191.00				
		LOT 4			BY LOT	244,240.00
4.1	bottle	Alcohol 70% Ethyl 500mL (400 bots. PREVENTIVE PROGRAM FOR COMMUNICABLE DISEASES) (60 bots. OTHER PROGRAM(PROVINCIAL FOOD AND DRUGS REGULATION)	PRESTIGE/MARK'S & CARE/SUPREME	460		
4.2	bottle	Disinfectant Spray, aerosol type 510 grams(morning Breeze, Linen, Fresh Blossom scent)(OTHER PROGRAM(PROVINCIAL FOOD AND DRUGS REGULATION)	LYSOL/MARK'S & CARE	12		
4.3	box	Disposable Syringe, Insulin 0.5mL,31G, 6mm with needle 100's	BD/TERUMO/COSM ED	50		
4.4	box	Disposable Syringe,5mL needle G23x5ml, 100s	HEXACARE/PROHE ALTHCARE/COSME D	10		
4.5	pack	Face mask KF94 10/pack (assorted colors)(OTHER PROGRAM(PROVINCIAL FOOD AND DRUGS REGULATION)	ZHONGKA/KF94/GE NERIC	65		
4.6	box	Latex Surgical Gloves 7.5 (100's)	HEXACARE/SOLITA IRE/SURGITECH	50		
4.7	pcs	Sputum Cups 60ml Charges: PREVENTIVE PROGRAM FOR COMMUNICABLE DISEASES/OTHER PROGRAM(PROVINCIAL FOOD AND DRUGS REGULATION) LGDF 2023 5-02-03-080 Amount: Php 244,240.00	GENERIC	4620		
		LOT 5			BV 1.07	400 404 00
5.1	bottle	Alcohol 70% Isopropyl 500ml	PRESTIGE/MARK'S & CARE/SUPREME	243	BY LOT	136,191.00
5.2	box	Alcohol swab 70% 100s	PARTNERS/SURGIT ECH/TOPCARE	15		
5.3	gallon	Alcohol 70% Isopropyl 4Liters	PRESTIGE/MARK'S & CARE/SUPREME	12		
5.4	box	Adhesive bandage 50s	MEDIPLAST/BONDA ID	12		
5.5	pack	Bouffant Cap/Surgical head cap, 21" 100s	GENERIC	20		
5.6	piece	Cadaver Bag Large/Adult (black)	GENERIC	30		
5.7	roll	Cotton 400g	HYGEEN/HEXACAR E	50		
5.8	piece	Coverall, Medical Disposable Protective suit, front	ZHONGKA	200		
5.9	box	Disposable Syringe 5cc 100's	HEXACARE/PROHE	12		

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

One Million Four Hundred Eighty Nine Thousand Nine Hundred Ninety Five Pesos And Total Amount in TOTAL 1,489,995.25 words: **Twenty Five Centavos**

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Gemo/B, mosal LIGHT HORIZON MEDICAL SUPPLIES

Very truly yours By the Afthority of the Governor

4, Series OLZOSANE RONA CAGAS Governor

Signature over Printed Name / Date 12-19-13 Date

ALTHCARE/COSME

Funds Available

Conforme

CAFOA No.

ISTOPHER T. TAN GDH-PDRRMO



PROVINCIAL GOVERNMENT OF DAVAO DEL SUR Matti, Digos City

Supplier: LIGHT HORIZON MEDICAL SUPPLIES P.O. No.: G-224-23CB Address: Door 1, NUD Bldg., Ponciano St., Davao City Date:

Email/Tel#: lighthorizon21@yahoo.com / (082) 244-Mode of Procurement: Competitive Bidding

7828/09093466912/09108863245 T.I.N: PHO End-User:

PR. No./Date 1544-CB-23 10/13/2023 Gentlemen:

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

Place of Delivery: Delivery Term: **FOB Destination**

Date of Delivery: Within 10 calendar days upon receipt of P.O. Payment Term : Cradit Racie

Date of L	Delivery :	Within 10 calendar days upon receipt of P.O.	Payment Terr	n:	Credit Basis	
Item No.	Unit	Item and Description	Brand Name (if Applicable)	Qty	Unit Cost	Total Cost
5.10	box	Disposable Syringe 3cc 100's	HEXACARE/PROHE ALTHCARE/COSME D	12	340.00	4,080.00
5.11	piece	Gown, Medical Isolation disposable Non-Sterile	GENERIC	200	87.00	17,400.00
5.12	box	Hypoallergenic Plaster 1 inch 10yard 12's	3M/PRIME/SURGIT ECH	20	484.00	9,680.00
5.13	box	KF94 3D Protective Filter Mask	ZHONGKA/KF94/GE NERIC	200	90.00	18,000.00
5.14	pair	Shoe Cover non woven	GENERIC	30	234.00	7,020.00
5.15	piece	Specimen bottle for stool 60ml	GENERIC	640	18.00	11,520.00
5.16	piece	Specimen bottle 1L, screw cap	GENERIC	25	73.00	1,825.00
5.17	box	Sterile Gauze pad 4"x4" 8ply 100's	PROHEALTHCARE/ PARTNERS/SURGIT ECH	20	360.00	7,200.00
5.18	box	Surgical Gloves 7.5 50's	HEXACARE/SOLITA IRE/SURGITECH	12	1,050.00	12,600.00
5.19	box	Surgical Face Mask 3ply 50's	PROHEALTHCARE/ AIRLIFE/INDOPLAS	261	95.00	24,795.00
5.20	pack	Tourniquet, flat rubber 3's	GENERIC	10	27.00	270.00
5.21	rack	Vacutainer Tube Red top 5ml (100s)	SURGITECH/BRAN DEN/TRULAB	20	684.00	13,680.00
5.22	box	Viral Transport media (inactivated) 100's	BRUNER/SANLI/ZY BIO	15	7,500.00	112,500.00
5.23	box	Medical Working gloves Large Powder free, 100's	HEXACARE/DR. CARE/GLOMED	15	270.00	4,050.00
		Charges: EPIDEMIOLOGY AND SURVEILLANCE PROGRAM LGDF 2023 5-02-03-080 Amount: Php 349,158.00				

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

Conforme

Total Amount in One Million Four Hundred Eighty Nine Thousand Nine Hundred Ninety Five Pesos And

Genno

Twenty Five Centavos words: 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.

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LIGHT HORIZON MEDICAL SUPPLIES Signature over Printed Name / Date

ity of the Governor 4. Series of 202 OF YNONNE RONA CAGAS

Very truly yours

1,489,995.25

5099-1227-101-1 12-29-73 Date 5707-12-23-101-

5101-12-27-101-CAFOA No. Funds Available



PROVINCIAL GOVERNMENT OF DAVAO DEL SUR Matti, Digos City

	OFFICIAL SEA			
Supplier:	LIGHT HORIZON MEDICAL SUPPLIES	P.O. No. :	G-224-23CB DFC 1 4 2023	
Address:	Door 1, NUD Bldg., Ponciano St., Davao City	Date:		
Email/Tel# :	lighthorizon21@yahoo.com / (082) 244- 7828/09093466912/09108863245	Mode of Procurement : Competitive Bidding		
T.I.N:	1020103033-003121031000032-0	End-User:	PHO	
PR. No./Date	1544-CB-23 10/13/2023	End Oodi .		
Gentlemen :	1044-015-23 10/10/2020			
oondomorr.	Please furnish this office the following articles subject to	the terms and conditions co	ntained herein:	
Place of Delivery		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	
	FOR MATERNAL AND CHILD HEALTH PROGRAM USE; FOR NON COMMUNICABLE DISEASE PROGRAM USE; FOR PREVENTIVE PROGRAM FOR COMMUNICABLE DISEASES/OTHER PROGRAM (PROVINCIAL FOOD AND DRUGS REGULATION) USE; FOR EPIDEMIOLOGY AND SURVEILLANCE PROGRAM USE. MATERNAL AND CHILD HEALTH PROGRAM LGDF, 2023 5-02-03-080 Amount: Php 760,406.25 NON COMMUNICABLE DISEASE PROGRAM LGDF 2023 5-02-03-080 Amount: Php 136,191.00 PREVENTIVE PROGRAM FOR COMMUNICABLE DISEASES/OTHER PROGRAM(PROVINCIAL FOOD AND DRUGS REGULATION) LGDF 2023 5-02-03-080 Amount: Php 244,240.00 EPIDEMIOLOGY AND SURVEILLANCE PROGRAM LGDF 2023 5-02-03-080 Amount: Php 349,158.00 The Supplier shall notify the PGSO a day before the actual delivery. ***********************************		1,489,995.25	
	Delivery shall be made not later than 12:00 noon	noty Sive Person And		
	One Million Four Hundred Eighty Nine Thousand Nine Hundred N Twenty Five Centavos	inety Five Pesos And	TOTAL 1,489,995.25	
	make the full delivery within the time specified above, a penalty of one Generally of one LIGHT HORIZON MEDICAL SUPPLIES Signature over Printed Name / Date	1	%) for everyday of delay shall be imposed. Very truly yours or O22 XXONNE ROÑA CAGAS Governof	

12~29から Date CAFOA No.

Funds Available