



Republic of the Philippines  
Department of Health  
Cordillera Administrative Regional Office  
Baguio City

Appendix 01

ACCOUNTING

PURCHASE ORDER  
DOH-CAR  
Entity Name

DATE: 10/15/20  
TIME: 8:00  
RECEIVED BY: [Signature]

Supplier	<b>PHIL PHARMAWEALTH, INC.</b> Suite 3001, 30th Floor Tektite East Tower, PSE, Exchange Rd., Ortigas Center, Pasig City (02) 683-0053 to 57-0917-515-4593/ csdepartment00@gmail.com	P.O. No.	<b>20-1105</b>
Address		Date	30-Sep-20
TIN	002-304-673-000	Mode of Procurement	Public Bidding

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

Place of Delivery	DOH-CAR	Delivery Term	
Date of Delivery	30 working days	Payment Term	CHARGE

Stock/ Property No	Unit	Description	Quantity	Unit Cost	Amount
	box	<b>PR 20-950</b> AMILODIPINE BESILATE, 10mg tablet, blister pack, box of 100s Generic Name: Amlodipine (as besilate) Brand Name: AMDIPINE Manufacturer: Mercury Laboratories Ltd. Country of Origin: India	200	30.70	6,140.00
	box	<b>PR 20-1055</b> ASPIRIN, enteric coated tablet, 80mg blister pack, box of 100s Generic Name: Aspirin Brand Name: ASPITOR Manufacturer: Concept Pharmaceuticals, Ltd. Country of Origin: India	600	59.00	35,400.00
	box	<b>CIPROFLOXACTIN, 500mg capsule, blister pack, box of 100s, *offer: tablet*</b> Generic Name: VCiprofloxacin (as Hydrochloride) Brand Name: PROVEX Manufacturer: Reyoung Pharmaceutical Co., Ltd. Country of Origin: China	20	158.00	3,160.00
	box	<b>CLOPIDOGREL, 75mg tablet, blister pack, box of 100s</b> Generic Name: Clopidogrel (as bisulfate) Brand Name: ARTHEOGREL Manufacturer: Bal Pharma Ltd. Country of Origin: India	200	107.00	21,400.00
<p><b>NOTE: Expiry date should be ≥ 18 months upon delivery</b></p> <p><b>Purpose:</b> For augmentation to BNB and BNBi in CAR. For Procurement of medicines in support to PHO and RHLs operations for COVID-19 response and management of Mt. Province</p>					
<b>TOTAL</b>					<b>66,100.00</b>

PE:AAA-20-06-100-20-06-1301-0150-PT

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 items.

This Office reserves the right to cancel this Purchase Order

Confirms: **JERME P. RAFAEL**  
Signature over Printed Name of Supplier  
Date: 10/21/20

Very truly yours,  
**RUBY C. CONSTANTINO, MD, MPH, CESO IV**  
Director IV

Fund Cluster: 01  
Funds Available: 992,825.99

ORS/BURS No.: 02-101101-20-09-2908  
Date of the ORS/BURS: 9/30/2020  
Amount: 492,825.99

**EIATZA J. LAGERA**  
Accountant II, OIC-Accounting Section



01/20/2020

**PURCHASE ORDER**  
**DOH-CAR**  
Entity Name

Supplier	<b>PHIL PHARMAWEALTH, INC.</b> Suite 3001, 30th Floor Tektite East Tower, PSE, Exchange Rd., Ortigas Center, Pasig City (02) 683-0053 to 570917-515-4593/ esdepartment00@gmail.com)	P.O. No.	<b>20-1105</b>
TIN	002-304-673-000	Date	30-Sep-20
		Mode of Procurement	Public Bidding

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

Place of Delivery	DOH-CAR	Delivery Term	
Date of Delivery	30 working days	Payment Term	CHARGE

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
	tablet	<b>PR 20-1055</b> <b>CO-AMOXICLAV, (Amoxicillin as Trihydrate + Potassium Clavulanate) 500mg + 125mg tablet, blister pack</b> Generic Name: Co-Amoxiclav Brand Name: KLAVIC Manufacturer: Swiss-Parenterals Pvt. Ltd Country of Origin: India	30,000	6.98	209,400.00
	tube	<b>FUSIDATE SODIUM/FUSIDIC ACID CREAM 2%, 5g collapsible tube</b> Generic Name: Fusidic Acid Brand Name: FUCID Manufacturer: U Square Lifesciences Pvt. Ltd Country of Origin: India	219	117.23	25,673.37
	box	<b>PR 20-950</b> <b>LOSARTAN POTASSIUM, 50mg, blister pack, box of 100s</b> Generic Name: Losartan Potassium Brand Name: LOSART Manufacturer: Concept Pharmaceuticals, Ltd. Country of Origin: India	200	78.80	15,760.00
	tube	<b>PR 20-1055</b> <b>MUPIROCIN OINTMENT 2%, 5g, collapsible tube</b> Generic Name: Mupirocin Brand Name: BACTRIDERM Manufacturer: U Square Lifesciences Pvt. Ltd Country of Origin: India	114	49.34	5,624.76
<p><b>NOTE: Expiry date should be ≥ 18 months upon delivery</b></p> <p><b>Purpose:</b> For augmentation to BNB and BNB<sub>1</sub> in CAR. For Procurement of medicines in support to PHO and RHUs operations for COVID-19 response and management of Mt. Province</p>					
<b>TOTAL</b>		Page 2 of 4			<b>256,458.13</b>

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.  
This Office reserves the right to cancel this Purchase Order

Conforme: **JERLIE P. RAFAEL**  
Signature over Printed Name of Supplier  
Date: 10/21/2020

Very truly yours,  
**RUBY C. CONSTANTINO, MD, MPH, CESO IV**  
Director IV

Fund Cluster: 01  
Funds Available: 442,025.99

**ELAIZA J. LAGERA**  
Accountant II, DIC/Accounting Section

ORS/BURS No.: 02-10101-20-09-2908  
Date of the ORS/BURS: 7/30/2020  
Amount: 442,025.99



Appendix 01

**PURCHASE ORDER**  
**DOH-CAR**  
**Entity Name**

Supplier: <b>PHIL PHARMAWEALTH, INC.</b>	P.O. No.: <b>20-1105</b>
Address: Suite 3001, 30th Floor Tektite East Tower, PSE, Exchange Rd., Ortigas Center, Pasig City (02) 683-0053 to 57/0917-515-4593/ csdepartment000@gmail.com	Date: 30-Sep-20
TIN: 002-304-673-000	Mode of Procurement: Public Bidding

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

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
	capsule	<b>PR 20-950:</b> fcs f OMEPRAZOLE, 40mg capsule, strip pack/blister pack Generic Name: Omeprazole Brand Name: HYPERZOL Manufacturer: Jiangsu Pengyao Pharmaceutical Co., Ltd. Country of Origin: China	5,038	3.98	20,051.24
	tablet	<b>PR 20-1055:</b> ROSUVASTATIN, 10mg tablet, blister pack, box of 100s Generic Name: Rosuvastatin Brand Name: ROZTAT Manufacturer: Aurochem Pharmaceuticals Pvt. Ltd. Country of Origin: India	2000	4.12	8,240.00
	nebulizer	<b>SALBUTAMOL, nebulizer 1mg/ml, 2.5ml unit dose</b> Generic Name: Salbutamol (as sulfate) Brand Name: AERO-VENT Manufacturer: Amanta Healthcare Ltd. Country of Origin: India	13900	5.23	72,697.00
	inhaler	<b>SALBUTAMOL, 100mcg/dose x 200 actuations metered dose inhaler</b> Generic Name: Salbutamol (as sulfate) Brand Name: VENTOLAX Manufacturer: Yangzhou No. 3 Pharmaceutical Co., Ltd. Country of Origin: China	243	79.34	19,279.62
<p><b>GENERAL CONDITION:</b> <b>Recall and Disposal:</b> a. The Supplier must ensure the quality of products until the time of acceptance by the procuring entity. In case of product recall due to safety issues, efficacy concerns, and quality defects, the supplier shall communicate and</p> <p><b>Purpose:</b> For augmentation to BNB and BNBI in CAR. For Procurement of medicines in support to PHO and RHUs operations for COVID-19 response and management of MI.</p>					
TOTAL					120,267.86

PS: SA-A 20-06-100, 20-06-100, 20-06-100, 20-06-100

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.

This Office reserves the right to cancel this Purchase Order

Conforme: **JERLIE P. RAFAEL**  
Signature over Printed Name of Supplier  
Date: 10/21/20

Very truly yours,  
**RUBY C. CONSTANTINO, MD, MPH, CESO IV**  
Director IV

Fund Classifier: 01  
Funds Available: 442,825.99

ORS/BURS No.: 02-10/101-20-09-2008  
Date of the ORS/BURS: 9/30/2020  
Amount: 442,825.99

ELAIZA J. LAGERA



**PURCHASE ORDER**  
**DOH-CAR**  
Entity Name

Supplier <b>PHIL. PHARMAWEALTH, INC.</b> Suite 3001, 30th Floor Tekme East Tower, PSE, Exchange Rd., Ortigas Center, Pasig City (02) 683-0053 to 578917-515-4593 / adepartment000@gmail.com Address ITN 002-104-673-000	P.O. No. <b>20-1105</b> Date <b>30-Sep-20</b> Mode of Procurement <b>Public Bidding</b>
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Gentlemen  
Please furnish this Office the following articles subject to the terms and conditions contained herein

Place of Delivery Date of Delivery	DOH-CAR <b>30 working days</b>	Delivery Term Payment Term	<b>CHARGE</b>
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Stock/Property No.	Unit	Description	Quantity	Unit Cost	Amount
		<p><b>PR 20-1055</b></p> <p>coordinate with the Market Authorization Holder, the Food and Drug Administration, and other stakeholders, and perform its functions to ensure successful product recall in compliance to the Guidelines on Product Recall provided for in FDA Circular No. 2016-012, dated July 25, 2016</p> <p>b. In case of product recalls, damage due to replacement, the costs associated with the proper handling or pull-out from health facilities where the items have already been distributed shall be borne by the Supplier if this is in accordance with FDA Circular No. 2016-012, and the approved product recall strategy of the Market Authorization Holder.</p> <p><b>Labelling instructions:</b> Standard labelling as approved by PFDA pursuant to AO 2016-0008</p> <p>In addition to the labelling requirements of FDA:</p> <p>a. On each vial, syringe, box, bottle, the following should be imprinted or stickered on non-removable or permanent sticker or label that is binding, and with residue and tearing, if removed:</p> <p style="text-align: center;">Philippine Government Property Department of Health-Cordillera NOT FOR SALE</p> <p>b. On each corrugated carton, should be imprinted or stickered with non-removable or permanent sticker or label that is binding, and with residue and tearing, if removed:</p> <p style="text-align: center;">Philippine Government Property Department of Health-Cordillera NOT FOR SALE</p> <p>Date of Manufacture: _____ Date of Expiry: _____ Batch/Lot No.: _____</p> <p style="text-align: right;">Subtotal (Page 1) 66,100.00 Subtotal (Page 2) 256,458.13 Subtotal (Page 3) 120,267.86</p> <p><b>NOTE: Expiry date should be ≥ 18 months upon delivery</b></p> <p><b>Purpose:</b> For augmentation to BNB and BNB in CAR, for Procurement of medicines in support to PHO and RHU's operations for COVID-19 response and management of ME.</p>			
<b>TOTAL</b>					<b>442,825.99</b>

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 items.

This Office reserves the right to cancel this Purchase Order

<p>Conforme</p> <p style="text-align: center;"><b>JERLIE P. RAFAEL</b></p> <p>Signature over Printed Name of Supplier</p> <p>Date: <u>10/21/2020</u></p>	<p>Very truly yours,</p> <p style="text-align: center;"><i>[Signature]</i></p> <p><b>RUBEN C. CONSTANTINO, MD, MPH, CESO IV</b> Director IV</p>
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<p>Fund Charter: <u>01</u></p> <p>Funds Available: <u>442,825.99</u></p> <p style="text-align: center;"><b>ETAIZA J. LAGERA</b> Accountant II, OIC - Accounting Section</p>	<p>ORS/BURS No.: <u>02-101101-2007-2968</u></p> <p>Date of the ORS/BURS: <u>9/30/2020</u></p> <p>Amount: <u>442,825.99</u></p> <p style="text-align: center;">Page 2 of 4</p>
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