



Department of Health  
National Capital Region  
**VALENZUELA MEDICAL CENTER**  
Padrigal St. Karuhatan, Valenzuela City  
Telefax No. 294-4625

FM-PROC-002  
Rev 2-01/25/19

**PURCHASE ORDER**

Supplier : <b>OMNIBUS BIO-MEDICAL SYSTEMS, INC.</b>	P.O. No. : <b>25-04-147</b>
Address : <b>4/F Wilson Corporate Center, 225 Wilson St. Greenhills, San Juan City</b>	Date : <b>04/02/2025</b>
TIN : <b>201-687-994-000</b>	Mode of Procurement : <b>Direct Contracting</b>

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

Place of Delivery : <b>VALENZUELA MEDICAL CENTER</b>	Delivery Term : <b>90CD</b>
Date of Delivery :	Payment Term :

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
4883	pc	Model: BX43 SN: 0G49624 Olympus Microscope Objective 2X Plan achromat objective 2X/0.06, WD 5.8	1	23,500.00	23,500.00
4884	pc	Attachment for Olympus 5-Header Microscope Olympus Microscope Objective 20X Plan achromat objective 20X/0.4, WD 1.2 (spring)	1	18,540.00	18,540.00
4885	pc	Attachment for Olympus 5-Header Microscope SIMPLE POLARIZING ATTACHMENT Olympus Analyzer for 5-header microscope For urate crystals observation for transmitted light	1	52,650.00	52,650.00
4886	pc	Attachment for Olympus 5-Header Microscope Olympus Polarizer for 5-header microscope For transmitted light Attachment for Olympus 5-Header Microscope P.R. No. 25-02-330 dated 2/17/2025 NOA dated 03/24/2025 Resolution No. 2025-102 dated 03/14/2025 Allocation: DERMATOLOGY DEPT. xxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxx	1	11,213.00	11,213.00
				Sub-Total	105,903.00

VALENZUELA MEDICAL CENTER  
ACCOUNTING SECTION

**RECEIVED**

04 APR 2025

By: [Signature] Time: 1:25

(Total Amount in Words)	<b>One Hundred Five Thousand Nine Hundred Three pesos only</b>	<b>P 105,903.00</b>
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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: \_\_\_\_\_

Signature over Printed Name of Supplier \_\_\_\_\_

Date \_\_\_\_\_

Very truly yours,  
[Signature] **APR 11 2025**  
**EDILBERTO V. CAVANEYRO MD, MHA, FPBS, FPSGS**  
OIC-Medical Center Chief II

[Signature] **4/4/25**

Funds Cluster:	ORS/BURS No. <b>25-04-361</b>
Funds Available:	Date of the ORS/BURS: <b>04 APR 2025</b>
<u>[Signature]</u> <b>RAYMUND JOE B. MACUANAN</b> Accountant III	Amount: <b>Php 105,903.00</b>