



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 :	ENSUREMED INC.	P.O. No. :	25-08-312
Address :	72 Richmack Building, Unit 117, Mindanao Avenue, Proj. 6, Quezon City	Date :	08/11/2025
TIN :	009-424-274-000	Mode of Procurement :	PB. No. VMC-2025-050 dated 04-08-25

Gentlemen:

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

Place of Delivery :	VALENZUELA MEDICAL CENTER	Delivery Term :	20CD
Date of Delivery :		Payment Term :	
Stock No.	Unit	Description	Quantity
248	kit	Admission kit with 1 pc Face towel (white, regular size); 1 pc toothbrush (soft bristle) with 1 sachet toothpaste (brand: Happy/Close-up); 1 pair metal Spoon and Fork; 1 pc Calibrated measuring cup 210ml ; 1 bottle 70% Isopropyl alcohol (Prestige) 150ml ; 1 pc Antibacterial soap 60 grams; 1 pc Digital Thermometer; 1 roll Tissue paper, 2ply; 1 pc Reusable clear bag with Valenzuela Medical Center name; (Individually packed; with indicated date of manufacture and expiration, if applicable) Offer: Brand: Admission Kit / Philippines 30 CD After Receipt Of 1st Delivery Schedule	3,624
248	kit	Admission kit with 1 pc Face towel (white, regular size); 1 pc toothbrush (soft bristle) with 1 sachet toothpaste (brand: Happy/Close-up); 1 pair metal Spoon and Fork; 1 pc Calibrated measuring cup 210ml ; 1 bottle 70% Isopropyl alcohol (Prestige) 150ml ; 1 pc Antibacterial soap 60 grams; 1 pc Digital Thermometer; 1 roll Tissue paper, 2ply; 1 pc Reusable clear bag with Valenzuela Medical Center name; (Individually packed; with indicated date of manufacture and expiration, if applicable) Offer: Brand: Admission Kit / Philippines 30 CD After Receipt Of 2nd Delivery Schedule	2,500
248	kit	Admission kit	2,500
			Sub-Total 1,207,360.00

(Total Amount in 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 for every day of delay shall be imposed on the undelivered item/s.

Very truly yours,

EDILBERTO V. CAVANEYRO MD, MHA, FPCS, FPGS
OIC-Medical Center Chief II

Conforme:

SITZMUND ASPNED

Signature over Printed Name of Supplier

8/22/2025

Date

Funds Cluster:
Funds Available:

ORS/BURS No.

25-08-931

Date of the ORS/BURS:

AUG 12 2025

Maintenance & Other

Operating Expenses

Amount:

Php 1,207,360.00

RAYMUND JOE B. MACUANA

Accountant IV



Department of Health
National Capital Region
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			Sub-Total	
			0.00	

(Total Amount in Words)	One Million Two Hundred Seven Thousand Three Hundred Sixty pesos only	P 1,207,360.00
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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:

S. CAVANEYRO, M.D.

Signature over Printed Name of Supplier

8/21/2025

Date

Very truly yours,

E. C. AUG 20 2025

EDILBERTO V. CAVANEYRO MD, MHA, FPCs, FPGS
OIC-Medical Center Chief II

Funds Cluster:
Funds Available:

ORS/BURS No.

Date of the ORS/BURS:

Maintenance & Other

Operating Expenses

Amount:

25-08-971

AUG 12 2025

Php 1,207,360.00

RAYMUND JOE B. MACUANAT

Accountant IV