



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 : **CYGEN MEDICAL SUPPLIES TRADING**

P.O. No. : **25-08-305**

Address : **0750 Saperia St. Calumpang Binangonan, Rizal**

Date : **08/06/2025**

TIN : **345-161-263-000**

Mode of Procurement : **Small Value Procurement**

Gentlemen:

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

Place of Delivery : **VALENZUELA MEDICAL CENTER**

Delivery Term : **60CD**

Date of Delivery :

Payment Term :

| Stock No. | Unit | Description | Quantity | Unit Cost | Amount |
|---|-------|--|----------|-----------|--------------|
| 4022 | pc | SUPPLY, TESTING & DELIVERY AUTOMATED EXTERNAL DEFIBRILLATOR Brand: Mindray/Beneheart D1 Defib Pro SN: FQ-7B013589 // SN: FQ-7B013600 // SN: FQ-7B013601 // Brand: Mindray/BeneHeart D1 SN: FQ-8A021027 // Li-Ion Battery | 4 | 27,000.00 | 108,000.00 |
| 5076 | piece | pack (14.8v3000m.Ah LI241001A) BF20 CHARGER STATION KIT Delivery: 60 calendar days upon receipt of PO P.R. No. 25-06-792 dated 6/2/2025 NOA dated 08/01/2025 Resolution No. 2025-243 dated 07/15/2025 Allocation: EFMS xxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxx | 1 | 83,000.00 | 83,000.00 |
| | | | | Sub-Total | 191,000.00 |
| (Total Amount in Words) One Hundred Ninety One Thousand pesos only | | | | | P 191,000.00 |

In case of failure to make the full delivery within the time specified above a penalty of one-tenth (1/10)
of one percent for every day of delay shall be imposed on the undelivered item/s.

Conforme:

Signature over Printed Name of Supplier

Date

Very truly yours,

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

ORS/BURS No.

Date of the ORS/BURS:

Amount:

Php 191,000.00

Funds Cluster:
Funds Available:

RAYMUND JOE B. MACUANA
Accountant IV