

**PURCHASE ORDER**  
PROVINCIAL GOVERNMENT OF CAMARINES NORTE

|               |                                                                              |                     |          |
|---------------|------------------------------------------------------------------------------|---------------------|----------|
| Supplier      | <u>LUNAR DRUGSTORE</u>                                                       | P.O. No.            | 25041483 |
| Address       | <u>Candelaria Street, Poblacion Norte</u><br><u>Paracale Camarines Norte</u> | Date                | 06-13-25 |
| Telephone No. | <u>0991-961-7412 / gabriel.xam1963@gmail.com</u>                             | Mode of Procurement | SHOPPING |
| TIN           | <u>135-481-638-000</u>                                                       |                     |          |

Gentlemen:

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

|                   |            |               |      |
|-------------------|------------|---------------|------|
| Place of Delivery | PHO        | Delivery Term | 1400 |
| Date of Delivery  | 06/30/2025 | Payment Term  | FULL |

| Item No. | Quantity | Unit Issue | ITEM DESCRIPTION                                               | Amount    |            |
|----------|----------|------------|----------------------------------------------------------------|-----------|------------|
|          |          |            |                                                                | Unit Cost | Total Cost |
| 1        | 1,400    | bot        | Iron with Folic Acid 60mg/400ug tablet (100's/bot.) FEROLEM OB | 250.00    | 350,000.00 |
| 2        | 1,600    | box        | Micronutrient powder (30's/box) VITA MEENA                     | 187.00    | 299,200.00 |
| 3        | 89       | bot        | Vitamin A 200,000 IU Capsule (100's/bot.)                      | 900.00    | 80,100.00  |

*for Nutrition Program Use - GAD FUND*

|                       |                                                             |            |
|-----------------------|-------------------------------------------------------------|------------|
| Total amount in words | Seven Hundred Twenty Nine Thousand Three Hundred Pesos Only | 729,300.00 |
|-----------------------|-------------------------------------------------------------|------------|

In case of failure to deliver within the time specified above, penalty of one-tenth (1/10) of one (1) percent of every day of delay shall be imposed.

Very truly yours,

Conforme:

  
JUDYTH H. ILAGAN

Signature over printed name of Supplier

06-16-25

Date

RICARTE R. PADILLA  
Governor