

PURCHASE ORDER
PROVINCIAL GOVERNMENT OF CAMARINES NORTE

Supplier	: BIOWELL MEDICAL ENTERPRISE	P.O. No.	: 25082246
Address	: Juan Esteves St. Guevarra Subd. Legaspi City	Date	: 09-24-25
Telephone No.		Mode of Procurement	: SHOPPING
TIN	: 199-555-086-000		

Gentlemen:

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

Place of Delivery	: CNPH	Delivery Term	: 14CD
Date of Delivery	: 10/09/2025	Payment Term	: FULL

Item No.	Quantity	Unit Issue	ITEM DESCRIPTION	Amount	
				Unit Cost	Total Cost
1	3	box	BACTIFAST PEDIA CULTURE RESIN, 40s	34,558.00	103,674.00
2	1	pack	MUELLER HINTON AGAR PLATE, WITH 5% SHEEPS BLOOD, PPM 10's	2,948.00	2,948.00
3	10	box	GLYCOHEMOGLOBIN (HbA1c) FIA TEST, 25T	14,798.00	147,980.00
4	2	box	CRP/Hs CRP FIA TEST, 25T	11,458.00	22,916.00
5	1	pc	DISPO OPTICAL LAMP BT1500	34,998.00	34,998.00
6	1	box	RAPIDCHEM MAGNESIUM REAGENT, AUTO 500T	20,278.00	20,278.00

for Laboratory Use

Total amount in words:	Three Hundred Thirty Two Thousand Seven Hundred Ninety Four Pesos Only	332,794.00
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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:

RICARTE R. PADILLA
Governor


MARK RYAN LUA

Signature over printed name of Supplier

09-25-25

Date


JOSEPH V. ASCUTIA
Acting Governor