

PURCHASE ORDER

PROVINCIAL GOVERNMENT OF CAMARINES NORTE

Supplier **CABRERA'S DRUGSTORE AND MEDICAL SUPPLIES**P.O. No. : **26010079**Address **Daet, Camarines Norte**Date : **02-16-26**Telephone No. : **(054)571-27-91**Mode of Procurement **SVP**TIN# **102-703-972**

Gentlemen:

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

Place of Delivery **CNPH**Delivery Term : **1400**Date of Delivery : **03/04/2026**Payment Term: **FULL**

Item No.	Quantity	Unit Issue	ITEM DESCRIPTION	Amount	
				Unit Cost	Total Cost
1	1,000	amp	Epinephrine (Adrenaline) 1mg/mL 1mL	30.00	30,000.00
2	250	amp	Norepinephrine 1mg/mL, 4mL soln for inj	105.00	26,250.00
3	1,000	amp	Tranexamic Acid 100 mg/mL, 5 mL Solution for Injection Ampule	95.00	95,000.00
4	2,800	amp	Tramadol 50mg/mL, 2mL	60.00	168,000.00
5	3,000	amp	Paracetamol 150mg/mL, 2mL soln for inj	14.00	42,000.00
6	1,500	pfs	Enoxaparin 4000iu, 0.4mg/0.4mL	165.00	247,500.00
7	2,000	pfs	Hydrocortisone 100mg powder for injection	54.00	108,000.00
8	1,000	pfs	Hydrocortisone 250mg powder for injection	68.00	68,000.00
9	200	amp	Ketorolac 30mg/mL, 1mL soln for inj	42.00	8,400.00
10	250	vial	Oxacillin 500mg powder for inj.	68.00	17,000.00
11	200	amp	Ondansetron 2mg/mL, 4mL (8mg/4mL) soln for inj	250.00	50,000.00
12	200	amp	Methylethergometrine 200mcg/mL, 1mL soln for inj. (non-ref)	85.00	17,000.00
13	200	vial	Ampicillin 1g powder for injection	30.00	6,000.00

for Pharmacy use

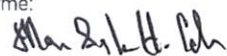
Total amount in words

Eight Hundred Eighty Three Thousand One Hundred Fifty Pesos Only**883,150.00**

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:



ANGELINA H. CABRERA

Signature over printed name of Supplier

02-19-26

Date

ENGR. JOSEPH V. ASCUTIA
Acting Governor