



DEPARTMENT OF ENERGY

QUINTUPLICATE

Energy Center, Rizal Drive cor. 34th St.,
Bonifacio Global City, Taguig

RMD-QF-17
18 Dec 2022
Rev. 1

PR No. 01-0101-2023-05-0244

PURCHASE ORDER

Supplier : CLINICAL GLOBAL FRONTIERS INC.
Address : Barangay Pulo, San Rafael, Bulacan
TIN : _____

P.O. No. : 2023-09-292
Date : 15-Sep-2023
Mode of Procurement : AMCP-NP Sec. 53.9
Reso No. 314 s. 2023

Gentlemen: MS. ANNALIZA C. VALIMENTO
Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery : DEPARTMENT OF ENERGY, Energy Center, Rizal Dr., BGC, Taguig City, Pangasinan, DOE Field Office, Cebu DOE Field Office, Davao DOE Field Office Delivery Term : As per DOE Notification of Delivery Schedule
Date of Delivery : M.C.S.P. Baldos (AS- HRMD) Payment Term : Payment to be processed within 30 days upon completion of services, submission of all required documents, & issuance of certificate of acceptance from the end-user. Payment is through LDDAP-ADA subject to government budgeting, accounting and auditing rules.

Stock/Property No.	Unit	Description	Quantity	Unit Cost	Amount
1	Unit	<p>PROCUREMENT FOR THE SUPPLY AND DELIVERY OF 1,000 UNITS OF FLU VACCINES FOR DOE MANILA, PANGASINAN, CEBU, AND DAVAO OFFICES.</p> <p>Flu Vaccine 0.5ml prefilled syringe, packed in delivery boxes within reasonable expiry date period, includes administration of vaccine in field offices.</p> <p>Other Terms and General Conditions: - as stated in the Request For Quotation (RFQ-01-0101-2023-05-0244-0711-0139)</p> <p><i>*Subject to deduction of allowed government taxes on the total amount.</i></p>	1000	650.00	₱650,000.00
				TOTAL AMOUNT	₱ 650,000.00

(Total Amount in Words) Six Hundred Fifty Thousand Pesos Only

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 underdelivered item/s.

Conforme: ANNALIZA VALIMENTO Signature over Printed Name of Supplier
Date: 9/28/23
Very Truly yours: ELISA B. MORALES Signature over Printed Name of Authorized Official
Designation: Director, AS

Fund Cluster : _____
Funds Available : _____
Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit: [Signature] 9/27/23

ORS/BURS No. : 02-10101-2023-05-0244
Date of the ORS/BURS: 9/26/23
Amount : 650,000.00