

07-0577



PURCHASE REQUEST

City Government of Tacloban

Department: TACLOBAN CITY HOSPITAL
Section: Medical Social Service

PR No. 7M-587 Date: June 28, 2021
SAI No. _____ Date: _____
RIS No. 021-587 Date: June 28, 2021

Item No.	QTY	Unit of Issue	DESCRIPTION	ESTIMATED UNIT COST	ESTIMATED TOTAL COST
1	1	Unit	Netbook 15s-eq-10117AU	45,000.00	45,000.00
			Window 10 Home		
			4500U		
			8gb DDR4 Memory		
			512 GB SSD		
			15.6		
			Radeon Vega 8		
Grand Total. P/					45,000.00

CHECKED AS TO APP.
INJANIE B. SANTOS
RAC Secretariat
DATE: June 28, 2021

Forty-Five Thousand
Pesos Only

Purpose: For Tacloban City Hospital use, Medical Social Service

Requested by: <u>JOEDINA BALEOS-GUNAGAY, MD, MPH, CFP, MHA</u> Chief of Hospital	Fund Availability: Fund Code: <u>300</u> Office Code: <u>TC-H-MH Hospital Fees</u> Expense/Acct. Code: <u>2-04-01-010-11</u> Funds Available: <u>(P 45,000.00)</u>	Approved by: BY THE AUTHORITY OF THE CITY MAYOR: <u>ATTY. ANALIZA A. QUILOPE</u> CITY ADMINISTRATOR <u>ALFRED S. ROMUALDEZ</u> City Mayor
	<u>SALVADOR A. ABINA JR.</u> City Accountant	

CHARGE TO: MAIP HOSPITAL FEES

CITY ACCOUNTANT OFFICE
RECEIVED
DATE: 7/5/21

MISD, TACLOBAN CITY
CERTIFICATE OF NECESSITY
CERTIFIED BY
RANDY B. CALAHI
HEAD, MISD
DATE: _____

07/07/2021
12:39 AM