

09-881

PURCHASE REQUEST CITY GOVERNMENT OF TACLOBAN LGU City Health Office PR No. Department: Date: 2021-861 Section: SAI No. Date: 021-861 RIS No. Date: Item Estimated Unit Unit/s Qts. **Item Description Estimated Cost** No. Cost Room Accommodation for 31 nights 1 25 room 21,700.00 542,500. Php 700.00 per night/room xxx nothing follows xxx the Hundred Forthy-two Thousand Five Hundred Alsos Only. Total 542,500. Purpose: Temporary isolation for suspected COVID19 positive. Fund Availability: APPROVED BY: Requested by: Fund Code: 300 (Toust Fund) Office Code: DRR MF - Trust FABRIGAS, MD, MPH C-CITY HEALTH OFFICER Code: 2-04-01-020 Fund Available: P 542, 500, W BY THE AUTHORITY OF THE CITY MAY Signature: Printed Name: BEBRANDO C. BERNADA

City Accountant

on tration

Designation:

CDRRM OFFICER

RECEIVED

City Mayor

TIME: 10:00 OFTE: 9/27/21