



PURCHASE REQUEST
CITY GOVERNMENT OF TACLOBAN

DATE: 10/24/22
5-5-22

Department: CITY HEALTH OFFICE PR No. 2022-0829
Division: _____ PR Date: 10/24/22

Item No.	Qty	Unit of Issue	Item Description	Estimated Unit Cost	Estimated Cost
1	53	pax	1 meal and snacks	550	29,150.00
			Venue rental with use of screen projector		
			And sound system		
				TOTAL AMOUNT:	

Twenty Nine Thousand
One Hundred Fifty Pesos
Only.
29,150.00

CERTIFICATION
(For Non-Common Supplies & Equipment)
THIS IS TO CERTIFY that the price(s) herein indicated is/are within the market price.

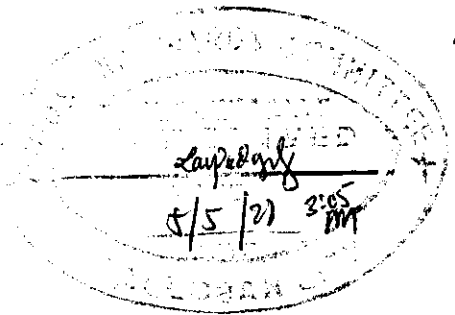
GLORIA ENRIQUEZ - FABRIGAS, MD, MPH, MHA _____
OIC - CITY HEALTH OFFICER Date

Purpose: PURPOSE: For COVID-19 Program Implementation Review

CHARGES: LGU MOOE - Public Health Emergency Program

	A	B	C
	Requested by:	Cash Availability:	Approved by:
Signature:	CERTIFIED included in the PPMP		By the Authority of the City Mayor <u>ATTY. ANACETO BELA LACANLADON</u> City Administrator
Printed Name:	GLORIA ENRIQUEZ - FABRIGAS, MD, MPH, MHA	<u>ZOSIMA A. CORDAÑO</u> CITY TREASURER	ALFRED S. ROMUALDEZ CITY MAYOR
Designation:	OIC - CITY HEALTH OFFICER	CITY TREASURER	CITY MAYOR

5-4-22 10:28
5-4-22 10:59
2022-0829



163
4411
5-02-99-990-103
P 29,150.00
ATRA 2022-04-4411-1868 ✓

96A-127 PUBLIC HEALTH EMERGENCY PLAN
PPH 5412