

PURCHASE REQUEST

City Government of Tacloban



Department: **TACLOBAN CITY HOSPITAL**

PR No. 2022-925 Date: 27 JUN 2022

Section: **PHARMACY**

SAI No. _____ Date: _____

RIS No. 022-925 Date: _____

Item No.	QTY	Unit of Issue	DESCRIPTION	ESTIMATED UNIT COST	ESTIMATED TOTAL COST
1	3	bx	Allopurinol 300mg tablet 100's	650.00	1,950.00
2	1,500	amps.	ATS 1,500 units 0.7ml	78.00	117,000.00
3	600	amps.	ATS 5,000 units	250.00	150,000.00
4	50	amps.	Digoxin 250mcg/ml 2ml	210.00	10,500.00
5	300	amps.	Epinephrine 1mg/ml 1ml	38.00	11,400.00
6	300	amps.	Furosemide 10mg/ml 2ml	20.00	6,000.00
7	50	amps.	Nicardipine 1mg/ml 2ml	419.85	20,992.50
8	1,500	amps.	Tetanus Toxoid 0.5ml	108.00	162,000.00
		XXXX	XX	XXXXXX	

CERTIFICATION

(For Non-Common Supplies & Equipment)

This is TO CERTIFY that the price(s) herein indicated is/are within the Drug Price Reference Index of the DOH.

JOEDINA BALEOS-GUMAGAY, MD, MPH, CFP, MHA.

Department Head

6/17/2022
DATE

Four hundred seventy
nine thousand eight
hundred forty two
Pesos and fifty cents only.

Grand Total. . . . P/ **479,842.50**

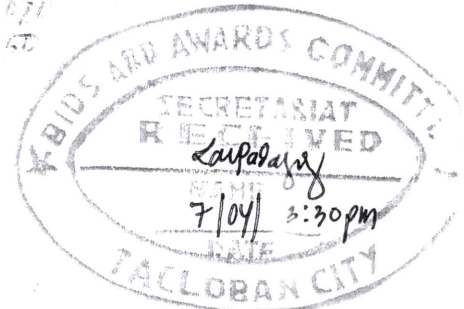
Purpose: For TCH Use

Requested by: JOEDINA BALEOS-GUMAGAY, MD, MPH, CFP, MHA Chief of Hospital	Fund Availability: Fund Code: _____ Office Code: _____ Expense/Acct. Code: _____ Funds Available: _____	Approved by: BY THE AUTHORITY OF THE CITY MAYOR MARY JO ROMUALDEZ City Mayor
	ZOSIMA A. CORDAÑO City Treasurer	
	MARY JO ROMUALDEZ City Mayor	
	(Signature of Zosima A. Cordaño)	

CHARGE TO: DRUGS | MED. SUPPLIES EXPENSE

CHECKED BY: [Signature]
 SECRETARIAT
 DATE: 27 JUN 2022

100
 1421
 5-02-07-071
 # 977, 842.50
 2022-06-17, 27/2



709 - Drug - Tacloban City