

PURCHASE REQUEST
MARIVELES, BATAAN
LGU

Department : MHO PR No. -1742- Date JUL 17 2023
Section : _____ SAI No. _____ Date _____
ALOBS No. _____ Date _____

Item No.	Quantity	Unit of Issue	Item Description	Estimated Unit Cost	Estimated Cost
1	18	box	Losartan 50mg tab 100's	900.00	16,200.00
2	18	box	Amlodipine 5mg tab 100's	500.00	9,000.00
3	18	box	Amlodipine 10mg tab 100's	600.00	10,800.00
4	17	box	Atorvastatin 20mg tab 100's	1,200.00	20,400.00
5	10	box	Simvastatin 40mg tab 100's	1,800.00	18,000.00
6	10	box	Allopurinol 300mg tab 100's	1,500.00	15,000.00
7	15	box	Metformin 500mg tab 100's	800.00	12,000.00
8	10	box	Glicazide 80mg tab 100's	700.00	7,000.00
9	10	box	Ciprofloxacin 500mg tab 100's	1,300.00	13,000.00
10	16	box	Cefuroxime 500mg tab 10's	450.00	7,200.00
11	20	box	Co-amoxiclav 625mg tab 30's	1,100.00	22,000.00
12	15	box	Febuxostat 40mg tab 30's	750.00	11,250.00
13	10	box	Celecoxib 200mg tab 100's	2,500.00	25,000.00
14	5	box	Multivitamins + Iron 30's	1,400.00	7,000.00
15	60	piece	Pizotifen and Vitamin B - Complex	100.00	6,000.00

NOTHING FOLLOWS

(Amount in words) One hundred ninety-nine thousand eight hundred fifty pesos only 199,850.00

Purpose: **Non-Communicable Disease Program in Relation to Annual Medical Check-Up for LGU employees**

	Requested by :	Cash Availability :	Approved by :
Signature			
Printed Name	DR. GERAARDO B. SEBASTIAN	ERWIN L. VILLAPANDO	ATTY. ACE JELLO C. CONCEPCION
Designation	Municipal Health Officer	Municipal Treasurer	Municipal Mayor