Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
	QCGH-23-DM-0245				
	ANCILLARY SERVICES				
	ANESTHESIA DEPARMENT				
	OPIODS				
1	Nalbuphine Hydrochloride 10mg/ml, 1ml (IM, IV, SC) (NUBAIN)	amp/vl	69	163.75	11,298.75
2	Butorphanol Tartrate 2mg/ml, 1ml (ZIPHANOL)	Amp	500	1,091.77	545,885.00
3	Morphine Sulfate 16mg/ml, 1ml (IM, IV) (HIZON)	Amp	500	122.25	61,125.00
4	Morphine Sulfate 10mg/ml, 1ml (IM, IV) (HIZON)	Amp	500	110.00	55,000.00
5	Morphine Sulfate 10mg (HIZON)	tablet/cap	500	55.00	27,500.00
6	Tramadol Hydrochloride 50mg/ml, 1ml (IM, IV, SC) (PEPTRAD)	amp/vl	500	75.00	37,500.00
7	Tramadol Hydrochloride 50 mg/mL, 2 mL (IM, IV, SC) (AMBIDOL)	amp/vl	500	50.00	25,000.00
8	Fentanyl Citrate 50mcg/ml, 2ml (IV) (SUBLIMAZE)	amp/vl	1,000	120.00	120,000.00
9	Oxycodone Hydrochloride 20mg/2ml (IM,SC) (OXYNORM)	amp	50	1,500.00	75,000.00
	NEUROMUSCULAR BLOCKING AGENTS				
10	Rocuronium Bromide 10mg/ml, 5ml (IV) (KABIROC)	amp/vl	641	400.00	256,400.00
11	Suxamethonium Chloride Succinylcholine 20mg/ml, 10ml (ANEKTIL)	amp/vl	750	614.70	461,025.00
12	Atracurium Besylate 10mg/ml, 2.5ml (ATRACURE)	amp/vl	380	230.00	87,400.00
	ANTI FIBRINOLYTIC AGENTS				
13	Tranexamic Acid 100mg/ml, 5ml (IM, IV) (ANCLOTIC)	amp/vl	1,000	100.00	100,000.00
	Hematinic Agents				
14	Iron Sucrose 20mg/ml, 5ml (FEROSE)	amp	24	490.00	11,760.00
	NSAIDS				
15	Ketorolac tromethamol 30mg/ml, 1ml (IM, IV) (ANALAC)	amp/vl	144	120.00	17,280.00
16	Diclofenac Sodium 25mg/ml, 3ml (IM, IV) (NOVAFENAC)	amp/vl	6	60.00	360.00
	BETABLETLOCKER				
17	Esmolol Hydrochloride 100mg/ml, 10ml (ESOBLOC)	amp/vl	300	850.00	255,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Signature Over Printed Name of Supplier / Date: May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : No. 2023-05-07927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great Green Growing

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL **Delivery Schedule :** Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
	IV ANESTHETICS				
18	Propofol 10mg/ml, 20ml (IV) (IV PRO)	amp/vl	620	350.00	217,000.00
19	Ketamine Hydrochloride 50 mg/mL, 10 mL (IM, IV) (KETAMAX)	amp/vl	411	2,000.00	822,000.00
	ANTICHOLINERGICS				
20	Atropine Sulfate 1mg/ml, 1ml (IM/IV/SC) (TROPIN)	amp/vl	353	40.00	14,120.00
	IV FLUIDS				
21	0.9% NaCl for IV Infusion solution 500ml (EUROMED)	Bottle	450	79.00	35,550.00
22	0.9% NaCl for IV Infusion solution (EUROMED)	Bottle	500	85.00	42,500.00
23	Sterile Water for Injection 50ml (no preservative) (EUROMED)	Bottle	240	50.00	12,000.00
24	Hydroxyethyl Starch 6% 500ml (SANBE HEST 200)	Bottle	50	900.00	45,000.00
25	Modified Fluid Gelatin 4% 500ml solution (GELOFUSINE)	Bottle	250	1,150.00	287,500.00
26	Isotonic Electrolyte Sodium Chloride 1L (STEROFUNDIN)	Bottle	269	320.00	86,080.00
	INHALATIONAL AGENTS				
27	Isoflurane Inhalation solution 100ml (ISORANE)	bottle.	203	2,750.00	558,250.00
28	Sevoflurane inhalation solution 250ml (SEVORANE)	bottle.	387	19,500.00	7,546,500.00
	CHOLINESTERASE INHIBITORS				
29	Neostigmine 500mcg/ml, 5 > 10ml (NOSTIGMINE)	amp/vl	200	100.00	20,000.00
	LOCAL ANESTHETICS				
30	Bupivacaine Hydrochloride 4ml amp (spinal) w/ 8% dextrose (SENSORCAINE HEAVY)	amp/vl	181	750.00	135,750.00
31	Bupivacaine Hydrochloride Isobaric 0.5%, 10ml (SENSORCAINE)	amp/vl	176	480.00	84,480.00
32	Lidocaine Hydrochloride 2% (20mg/ml), 5ml (IM/IV) (EUROCAINE)	amp/vl	40	35.00	1,400.00
33	Lidocaine Hydrochloride 2% 20mg/ml, 20ml (IM/IV) (EUROCAINE)	amp/vl	10	65.00	650.00
34	Ropivacaine 10mg/ml (IV) polyamp (NAROPIN)	polyamp	122	600.00	73,200.00
35	Lidocaine Hydrochloride 10% Pump spray 50ml (XYLOCAINE)	bottle.	3	2,643.72	7,931.16
	VASOPRESSORS				
36	Ephedrine Sulfate 50mg/ml, 1ml (IM/IV) (HIZON)	amp/vl	290	150.00	43,500.00

MA. JOSEFINA G. BELMONTE
City Mayor

Jeanne D. Cruz
Authorized Representative
Please Over Printed Name of Supplier / Date

May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : 100-2023-05-09927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great Green Growing

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
37	Norepinephrine bitartrate 1mg/ml, 2 ml (IV infusion) (NORPHED)	Amp	150	450.00	67,500.00
38	Dopamine Hydrochloride 40mg/ml, 5ml (IV) (DOPINE)	amp/vl	23	140.00	3,220.00
39	Dobutamine Hydrochloride 50mg/ml, 5ml (concentrate) (IV infusion) (DOBUKON)	amp/vl	39	300.00	11,700.00
	BENZODIAZEPINES				
40	Midazolam 5mg/ 3ml (IM, IV) (DORMICUM)	amp/vl	500	200.00	100,000.00
41	Midazolam 5mg/ml, 1ml (IM, IV) (DORMICUM)	amp/vl	500	105.35	52,675.00
	OTHERS				
42	Ondansetron 2 mg/ml, 2ml (IM, IV) (OTRON)	amp/vl	25	300.00	7,500.00
43	Sodium Bicarbonate 1mEq/ml, 100ml (adult) (IV infusion) (BBRAUN)	amp/vl.	30	550.00	16,500.00
44	Calcium Gluconate 10%, 10 mL (IV) (EUROMED)	amp/vl	16	60.00	960.00
45	Paracetamol 10mg/ml, 100ml solution for infusion (IV) (THERMODOL IV)	amp/vl	161	429.00	69,069.00
46	Sugammadex 100 mg/ml solution for injection (IV), 2ml (BRIDION)	amp/vl	66	6,834.00	451,044.00
	DENTAL SERVICE				
	I.V. FLUID				
47	0.9% NaCl for Irrigation solution 1L (EUROMED)	bottle.	6	85.00	510.00
48	Lidocaine Hydrochloride 10% pump spray 50ml (XYLOCAINE)	bottle.	16	2,643.72	42,299.52
49	Lidocaine (as Hydrochloride) 2% 1.8 mL carpule with epinephrine (local infiltration) (ZEYCO FD)	carpule	1,160	48.40	56,144.00
50	Amoxicillin Trihydrate capsule, 500mg (AMBIMOX)	Cap	1,489	7.50	11,167.50
51	Clindamycin Hydrochloride capsule, 300 mg (ACRESIL)	cap	2,000	10.00	20,000.00
52	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 500mg amoxicillin (as trihydrate) + 125 mg potassium clavulanate per tabletlet (RANICLAV)	Cap	1,567	18.50	28,989.50
53	Mefenamic acid 500mg (MECID)	tablet/cap	2,000	5.00	10,000.00
54	Povidone Iodine 1% Oral Antiseptic 60 ml (ALFA GARGLE)	bottle.	114	89.00	10,146.00
55	Tranexamic acid 500 mg (DLI)	tablet/cap	181	10.00	1,810.00
	HEMODIALYSIS UNIT				

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date: May 13, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : 100-2023-05-07927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
56	Heparin (unfractionated) sodium 5000iu/ml, 5ml (IV infusion, SC) (bovine origin) (APRINOL 25000)	amp/vl	1,772	300.00	531,600.00
57	Amiodarone Hydrochloride 50mg/ml,3ml (IV) (EURYTHMIC)	amp/vl	1	321.25	321.25
58	Aspirin 80mg (SAPHRIN)	Tablet	8	1.50	12.00
59	Atropine Sulfate 1 mg/ml , 1ml (IM/IV/SC) (TROPIN)	amp/vl	5	40.00	200.00
60	Salbutamol (as sulfate) Solution for nebulization 2mg/ml, 2.5ml (HIVENT DS)	Nebule	10	20.00	200.00
61	Diazepam 5 mg/mL, 2 mL (IM, IV) (VALIUM)	amp/vl	15	105.00	1,575.00
62	Calcium Gluconate, 10%, 10 mL (IV), (10mg) (EUROMED)	amp/vl	4	60.00	240.00
63	Dextrose 50% solution for injection 50ml (EUROMED)	amp/vl	5	65.00	325.00
64	Clonidine Hydrochloride 75mcg (CLODIN)	Tablet	15	20.00	300.00
65	Diphenhydramine Hydrochloride, 50mg/ml 1ml*im,IV) (ALLERIGHT)	amp/vl	5	50.00	250.00
66	Digoxin 0.5mg 250mcg/ml, 2ml (IM,IV) (CARDIOXIN)	amp/vl	4	230.00	920.00
67	Dobutamine Hydrochloride 50mg/ml, 5ml (concentrate) (IV infusion) (DOBUKON)	amp/vl	4	300.00	1,200.00
68	Dopamine Hydrochloride 40mg/ml 5ml (IV) 200mg (DOPINE)	amp/vl	3	140.00	420.00
69	Epinephrine (adrenaline) Hydrochloride 1mg/ml,1ml(IM, SC) (GRAND PHARMA)	amp/vl	6	80.00	480.00
70	Hydrocortisone Sodium Succinate 250mg (IV) (GORTIZONE)	amp/vl	2	180.00	360.00
71	Lidocaine Hydrochloride 2% Local anesthesia 50ml (EUROCAINE)	amp/vl	2	90.00	180.00
72	Mefenamic acid 500mg/tablet (MECID)	tablet/cap	8	5.00	40.00
73	Isosorbide dinitrate 5mg (sublingual) (SORBANCE)	tablet/cap	9	20.00	180.00
74	Norepinephrine bitartrate 1mg/ml, 2 ml (IV infusion) (NORPHED)	amp/vl	4	450.00	1,800.00
75	Paracetamol 150mg/ml, 2ml ampule solution for injection (IM/IV) (AMCETAM)	ampule	1	20.00	20.00
76	Phenobarbital 30mg (PHILUSA)	cap	7	3.90	27.30
77	Sodium Bicarbonate 1mEq/ml, 50ml (adult) (IV Infusion) (HOSPIRA)	amp/vl	4	159.75	639.00
78	Terbutaline (as Sulfate) 500mcg/ml, 1ml (IM,IV,SC) (BRICALIN)	amp/vl	1	140.00	140.00
79	Tramadol Hydrochloride 50mg (GESITRAM)	tablet/cap	4	10.00	40.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne E. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : no-2023-05-00927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
80	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle	7,529	85.00	639,965.00
81	5% Dextrose in 0.3% Sodium Chloride 1L (EUROMED)	bottle	2	85.00	170.00
82	5% Dextrose in Lactated Ringer's Solution 1L (EUROMED)	Bottle	5	85.00	425.00
83	5% Dextrose in Balance Multiple Maintenance solution (NM) 500ML (EUROSOL-M)	bottle	3	79.00	237.00
84	5% Dextrose in 0.9% Sodium Chloride 1L (EUROMED)	bottle	5	85.00	425.00
85	5% Dextrose in Water 250ml (EUROMED)	bottle	5	135.00	675.00
	PHARMACY DEPARTMENT				
86	Hydroxyethyl Starch 6% 500ml (SANBE HEST 200)	bottle.	100	900.00	90,000.00
87	Lactated Ringer's Solution 1L (EUROMED)	bottle.	3,000	85.00	255,000.00
88	Mannitol 20% 500ml (BBRAUN (OSMOFUNDIN))	bottle.	2,000	205.00	410,000.00
89	Modified Fluid Gelatin 4% 500ml solution (GELOFUSINE)	bottle.	100	1,150.00	115,000.00
90	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle.	30,000	85.00	2,550,000.00
91	0.9% NaCl for Irrigation solution 1L (EUROMED)	bottle.	8,463	85.00	719,355.00
92	0.9% NaCl for IV Infusion solution 500ml (EUROMED)	bottle	180	79.00	14,220.00
93	5% Dextrose in Lactated Ringer's Solution 1L (EUROMED)	bottle.	20,000	85.00	1,700,000.00
94	5% Dextrose in 0.3% Sodium Chloride 1L (EUROMED)	bottle.	52	85.00	4,420.00
95	5% Dextrose in 0.3% Sodium Chloride 500ml (EUROMED)	bottle.	100	79.00	7,900.00
96	5% Dextrose in 0.9% Sodium Chloride 1L (EUROMED)	bottle.	2,000	85.00	170,000.00
97	5% Dextrose in Balance Multiple Maintenance Solution (NM) 1L (EUROSOL-M)	bottle.	70	85.00	5,950.00
98	5% Dextrose in Balance Multiple Maintenance Solution (IMB) 500ml (EURO-ION)	bottle.	441	79.00	34,839.00
99	5% Dextrose in Water 250ml (EUROMED)	bottle.	2,500	135.00	337,500.00
100	5% Dextrose in Water 500ml (EUROMED)	bottle.	2,500	79.00	197,500.00
101	Lidocaine HCl 2% (20MG/ML) 5ml plastic polyamp (EUROMED)	polyamp	263	35.00	9,205.00
102	Isotonic Electrolyte Sodium Chloride 1L (STEROFUNDIN)	bottle	88	320.00	28,160.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : MA-2023-05-03427

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

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Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
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Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
	IM/IV PREPARATIONS				
103	All-in-One Admixtures 1875 ml (NUTRIFLEX LIPID PERI)	bottle	155	5,300.00	821,500.00
104	All-in-One Admixtures 2500 ml (KABIVEN CENTRAL)	bottle	200	6,500.00	1,300,000.00
105	Amino Acids, Crystalline Standard 3.5%, 500ml bottle (IV infusion) (AMINOGEN-S)	bottle	10	1,200.00	12,000.00
106	Sterile Water for Injection 50ml (no preservative) (EUROMED)	Bottle	2,050	50.00	102,500.00
107	Piperacillin Sodium 4gm + Tazobactam Sodium 500mg (IV infusion) (VIGOCID)	amp/vl.	3,150	480.00	1,512,000.00
	NBB PHARMACY				
	I.V. FLUID				
108	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle.	5,000	85.00	425,000.00
	DANGEROUS DRUGS				
109	Diazepam 5 mg/mL, 2 mL (IM, IV) (VALIUM)	amp/vl	100	105.00	10,500.00
110	Fentanyl Citrate 50mcg/ml, 2ml (IV) (SUBLIMAZE)	amp/vl	300	120.00	36,000.00
111	Midazolam 5mg/ml, 3ml (IM, IV) (DORMICUM)	amp/vl	500	200.00	100,000.00
112	Morphine Sulfate 16mg/ml, 1ml (IM, IV) (HIZON)	Amp	100	122.25	12,225.00
	ANESTHETICS DRUGS				
113	Adenosine 3 mg/ml, 2ml (IV) (ADESAN)	amp/vl	30	1,100.00	33,000.00
114	Atropine Sulfate 1mg/ml, 1ml (IM/IV/SC) (TROPIN)	amp/vl	176	40.00	7,040.00
115	Bupivacaine Hydrochloride 4ml amp (spinal) w/ 8% dextrose (SENSORCAINE HEAVY)	amp/vl	82	750.00	61,500.00
116	Bupivacaine Hydrochloride 0.5%, 10ml (SENSORCAINE)	amp/vl	80	480.00	38,400.00
117	Esmolol Hydrochloride 100mg/ml, 10ml (ESOBLOC)	amp/vl	10	850.00	8,500.00
118	Isoflurane Inhalation solution 100ml (ISORANE)	bottle.	4	2,750.00	11,000.00
119	Propofol 10mg/ml, 20ml (IV) (IV PRO)	amp/vl	93	350.00	32,550.00
120	Sevoflurane inhalation solution 250ml (SEVORANE)	bottle.	7	19,500.00	136,500.00
	IM/IV PREPARATIONS				

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : no 2023-05-089427

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

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Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
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		Contact Number	:

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Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
121	Amiodarone Hydrochloride 50mg/ml, 3ml (IV) (EURYTHMIC)	amp/vl	144	321.25	46,260.00
122	Ampicillin Sodium 500mg + Sulbactam Sodium 250mg(IM/IV) (AMSULVEX)	amp/vl	149	450.00	67,050.00
123	Ampicillin Sodium 250mg (IM/IV) (POLYPEN)	amp/vl	169	65.00	10,985.00
124	Ampicillin Sodium 500mg (IM/IV) (AMPIVEX)	amp/vl	98	50.00	4,900.00
125	Ceftazidime pentahydrate 1g (IM, IV) (CEFTEBAS)	amp/vl	18	300.00	5,400.00
126	Ceftriaxone Sodium 1gm + 10ml diluent (IV) (RACEF)	amp/vl	660	350.00	231,000.00
127	Cefuroxime Sodium 750mg (IM, IV) (NEOCEFUXIME)	amp/vl	225	200.00	45,000.00
128	Ciprofloxacin Lactate 2mg/ml, 200ml (IV Infusion) (CIPRONAT)	amp/vl	133	450.00	59,850.00
129	Clindamycin Phosphate 150mg/ml, 2ml (IM, IV) (CLINDASEPH)	amp/vl	300	275.00	82,500.00
130	Dexamethasone 4 mg/mL, 2 mL ampule/vial (IM, IV)(as sodium phosphate) (DEXAMAX)	amp/vl	212	50.00	10,600.00
131	Diphenhydramine Hydrochloride 50mg/ml, 1ml (IM, IV) (IV infusion) (ALLERIGHT)	amp/vl	203	50.00	10,150.00
132	Dobutamine Hydrochloride 50mg/ml, 5ml (concentrate) (DOBUKON)	amp/vl	156	300.00	46,800.00
133	Epinephrine (adrenaline) Hydrochloride 1mg/ml,1ml(IM, SC) (GRAND PHARMA)	amp/vl	422	90.00	37,980.00
134	Furosemide 10mg/ml, 2ml (IM, IV) (FUROSAN)	amp/vl	250	25.00	6,250.00
135	Gentamicin Sulfate 40mg/ml, 2ml (IM, IV) (GENTACARE)	amp/vl	30	30.00	900.00
136	Heparin (unfractionated) sodium 5000iu/ml, 5ml (IV infusion, SC) (bovine origin) (APRINOL 25000)	amp/vl	3	300.00	900.00
137	Human Albumin 20% IV infusion Solution 50ml (ALBUMAX)	bottle	151	4,200.00	634,200.00
138	Human Albumin 25% IV infusion Solution 50ml (PLASBUMIN)	bottle	35	4,500.00	157,500.00
139	Hydrocortisone Sodium Succinate 100mg (IV) (CORTEF)	amp/vl	24	120.00	2,880.00
140	Immunoglobulin Normal, Human 50mg/ml, 50ml (IGIV) (IV) (IV GLOBULIN SN)	amp/vl	10	10,752.00	107,520.00
141	Isosorbide Dinitrate 1mg/ml, 10ml (IV) (ISOKET)	amp/vl	50	653.25	32,662.50
142	Ketorolac tromethamol 30mg/ml, 1ml (IM, IV) (ANALAC)	amp/vl	144	120.00	17,280.00
143	Levofloxacin 5 mg/mL solution for IV infusion, 100 ml (LOXEVA)	amp/vl	400	850.00	340,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature of Supplier / Name of Supplier / Date

May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : 120-2023-05-03427

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: **QUEZON CITY GENERAL HOSPITAL**	Project Number	;CONSO-23-DM-0712
Company Name	; **PLANET DRUGSTORE CORPORATION**	Mode of Procurement	:Public Bidding
Address	; **137 Marina Street, Balong Bato, San Juan City**	Resolution No.	:23-PB-258
Business Type	: **Corporation Registration #CS200708928**	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL **Delivery Schedule** : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
144	Meropenem trihydrate 1g powder (IV) (MEROMAX IV)	amp/vl	896	850.00	761,600.00
145	Metoclopramide Hydrochloride 5mg/ml, 2ml (IM, IV) (METOCLOSIL)	amp/vl	250	30.00	7,500.00
146	Metronidazole 5mg/ml, 100ml (IV infusion) (EUROMET)	bottle	498	60.00	29,880.00
147	Nicardipine Hydrochloride 1mg/ml, 10ml (IV) (NICAPEDZ)	amp/vl	168	645.75	108,486.00
148	Norepinephrine bitartrate 2mg/ml, 4 ml (IV infusion) (MEPHRIN)	amp/vl	2,500	1,275.00	3,187,500.00
149	Norepinephrine bitartrate 1mg/ml, 4 ml (IV infusion) (QUIPRIN)	amp/vl	10	600.00	6,000.00
150	Omeprazole powder 40mg + 10ml solvent (IV) (RANZOLE)	amp/vl	100	250.00	25,000.00
151	Paracetamol 150 mg/mL, 2mL amp soln for injection (IM/IV) (AMCETAM)	amp/vl	328	20.00	6,560.00
152	Penicillin G Crystalline (benyzylpenicillin sodium) 1,000,000 units (IM/IV) (CATHAY)	vial	29	27.68	802.72
153	Penicillin G Crystalline (benyzylpenicillin sodium) 5,000,000 units (IM/IV) (LAKESIDE)	vial	41	30.00	1,230.00
154	Sodium Bicarbonate 1mEq/ml, 100ml (adult)(IV infusion) (BBRAUN)	amp/vl	13	550.00	7,150.00
155	Tramadol Hydrochloride 50mg/ml, 2ml (IM, IV, SC) (AMBIDOL)	amp/vl	1,000	50.00	50,000.00
156	Tranexamic Acid 100mg/ml, 5ml (IM, IV) (ANCLOTIC)	amp/vl	1,000	100.00	100,000.00
157	Vitamin B1 100mg + B6 100mg + B12 1mg per 3ml (IV) (NEUROBE)	amp/vl	10	140.00	1,400.00
158	Potassium Chloride 2 meq/ml, 20ml (IV infusion) (EUROMED)	amp/vl	60	48.75	2,925.00
159	Piperacillin Sodium 4gm + Tazobactam Sodium 500mg (IV infusion) (VIGOCID)	Vl	500	480.00	240,000.00
160	Cefotaxime sodium 500 mg vial + 2 mL diluent (IM, IV) (PANTAXIM)	amp/vl	100	510.00	51,000.00
161	Pneumococcal Polyvalent Vaccine, 25mcg/0.5mL, (polysaccharide) prefilled syringe or single dose vial (IM, SC) (PNEUMOVAX23)	p-syr	13	2,200.00	28,600.00
162	Enoxaparin Sodium 100mg/ml, 0.6ml pre-filled syringe (SC) (LOMOH)	p-syr	797	675.00	537,975.00
163	Cefepime Hydrochloride 1g (IM, IV) (CEFEVEX)	amp/vl	11	950.00	10,450.00
164	Phytomenadione 10 mg/mL, 1 mL (IM, IV, SC) (AMBIVIT K)	amp/vl.	121	40.00	4,840.00
165	Vancomycin HCL 1g (IV) (AVANCOMYCIN 1)	amp/vl	50	550.00	27,500.00
	ORAL, OPHTHALMIC, NEBULES & PSYCH. PREPARATIONS				
166	Acetylcysteine 600mg effervescent tabletlet (FLUIMUCIL)	Table	715	30.00	21,450.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : 100-2023-05-00937

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
167	Aluminum Magnesium Hydroxide+Magnesium Hydroxide 200mg+100mg (ZILGRAM)	Tablet	19	4.00	76.00
168	Amlodipine besilate 10mg (AMBESYL)	tablet/cap	3,428	8.75	29,995.00
169	Amlodipine besilate 5mg (AMBESYL)	tablet/cap	2,077	6.45	13,396.65
170	Ascorbic Acid 500mg, film-coated (APCEE)	Tablet	1,000	2.50	2,500.00
171	Azithromycin 200 mg/5 mL (as monohydrate), powder for suspension, 15 ml (AZITAS)	Bottle	9	250.00	2,250.00
172	Azithromycin 500mg (as monohydrate) (AZITHVA)	tablet/cap	300	40.00	12,000.00
173	Budesonide 250mcg/ml, 2ml (unit dose) for nebulization (BREECORT)	Neb	33	80.75	2,664.75
174	Calcium Carbonate 500mg (elemental Calcium) chewable (CALSAN)	tablet	175	15.00	2,625.00
175	Cefixime 200mg (FLAMIFIX)	tablet/cap	720	65.00	46,800.00
176	Cefuroxime axetil 500mg (AEROX)	tablet/cap	298	15.00	4,470.00
177	Celecoxib 200mg (EMICOX)	tablet/cap	158	7.75	1,224.50
178	Chlorhexidine Gluconate 0.12% and 4%, 120 mL (ORAHEX)	bottle	410	164.00	67,240.00
179	Ciprofloxacin hydrochloride 500mg (CYFROX)	tablet/cap	322	15.00	4,830.00
180	Doxycycline 100mg (as hyclate) (DOTHIX)	tablet/cap	368	10.00	3,680.00
181	Eperisone 50mg (MYELAX)	tablet	500	25.00	12,500.00
182	Epoetin Alfa (recombinant human erythropoietin 4000 IU/ 0.4 ml, pre-filled syringe with needle (IV, SC) (EPOLITT)	p-syr.	250	750.00	187,500.00
183	Ferrous Sulfate 60mg > 325mg elemental iron (FERRICORE)	tablet/cap	1,000	3.00	3,000.00
184	Irbesartan 150mg (VIRBEZ)	tablet/cap	169	20.00	3,380.00
185	Irbesartan 300mg (VIRBEZ)	tablet/cap	611	22.00	13,442.00
186	Levetiracetam 500mg (IVETRA 500)	tablet	726	55.00	39,930.00
187	Loperamide 2mg (SCHEELE)	tablet	500	10.00	5,000.00
188	Losartan 100mg (as potassium salt) (VIVASARTAN)	tablet/cap	3,200	8.00	25,600.00
189	Losartan 50mg (as potassium salt) (VIVASARTAN)	tablet/cap	4,000	7.00	28,000.00
190	Mecobalamin 500mcg (MEBAAL-500)	tablet/cap	500	20.00	10,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : no. 2023-05-07923

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	;CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	;Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	;23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	;006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
191	Mefenamic acid 500mg (MECID)	tablet/cap	3,000	5.00	15,000.00
192	Metronidazole 500mg (MEDGYL)	tablet/cap	500	5.00	2,500.00
193	Multivitamins Adult Vit A: 600-700mcg or 2,000-2,500 IU, Vit B1: 1.3-1.7mg, Vit B2: 0.7-3mg, Vit B6: 1.6-2mg, Vit B12: 2-6mcg, Vit C: 65-80mg, Vit D: 400 IU (10 mcg) (MULTIGEN)	tablet/cap	400	5.00	2,000.00
194	Nimodipine 30mg (NIMOTOP)	tablet/cap	307	44.70	13,722.90
195	Omeprazole 20mg (OMEPHIL-20)	tablet/cap	342	25.00	8,550.00
196	Omeprazole 40mg (RANZOLE)	tablet/cap	583	35.00	20,405.00
197	Potassium Chloride 600mg (K-LYTE)	tablet/cap	346	15.50	5,363.00
198	Propranolol Hydrochloride 10mg (ORANOL)	tablet	599	7.75	4,642.25
199	Rosuvastatin (as calcium salt) 10mg (AURORA)	tablet/cap	482	12.00	5,784.00
200	Rosuvastatin (as calcium salt) 20mg (AURORA)	tablet/cap	354	16.00	5,664.00
201	Sevelamer Carbonate 800mg (PERFOSEN)	tablet	615	65.00	39,975.00
202	Sodium Bicarbonate 650mg (SUPRACID)	cap	610	1.80	1,098.00
203	Trimetazidine 35mg (DINEMIC-SR)	tablet/cap	382	25.00	9,550.00
204	Vitamin B1 100mg, B6 5mg, B12 50mcg (B-complex) (RAPID-B100)	tablet/cap	900	8.00	7,200.00
205	Zinc Gluconate 70mg (DR. ZENS (LLOYD))	tablet/cap	500	12.00	6,000.00
	RADIOLOGY DEPARTMENT				
206	5% Dextrose in 0.9% Sodium Chloride 1L (EUROMED)	bottle.	20	85.00	1,700.00
	IM/IV PREPARATIONS				
207	Diphenhydramine Hydrochloride 50mg/ml, 1ml (IM, IV) (ALLERIGHT)	amp/vl	5	50.00	250.00
208	Epinephrine (adrenaline) Hydrochloride 1mg/ml, 1ml (IM, SC) (GRAND PHARMA)	amp/vl	17	80.00	1,360.00
209	Gadobutrol 1.0 mmol/mL solution for injection, 5 mL pre-filled syringe (GADOVIST)	amp/vl	40	6,800.00	272,000.00
210	Gadobutrol 1.0 mmol/mL solution for injection, 15 Ml (GADOVIST)	amp/vl	26	12,200.00	317,200.00
211	Iopamidol 612mg/mL equiv. to 300mg iodine, 100 mL (SCANLUX)	amp/vl	16	3,475.00	55,600.00
212	Iopamidol 612mg/mL equiv. to 300mg iodine, 50 mL (SCANLUX)	amp/vl	16	1,975.00	31,600.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature / Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : VOU-2023-05-03927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
	MEDICAL SERVICES				
	ANIMAL BITE TREATMENT CENTER				
213	Anti-tetanus serum (equine) 1500 IU/mL, 0.7 mL (IM) (ANTITET)	amp/vl	2,000	140.00	280,000.00
214	Cefuroxime axetil 500mg (AEROX)	tablet/cap	224	15.00	3,360.00
215	Celecoxib 200 mg (EMICOX)	tablet/cap	100	7.75	775.00
216	Cetirizine dihydrochloride 10mg/mL (oral drops) 10mL (NEW MYREX)	bottle.	30	30.00	900.00
217	Cetirizine dihydrochloride 1mg/mL solution, 60mL (MEDRIZINE)	bottle.	30	55.00	1,650.00
218	Cetirizine dihydrochloride 10mg (SAPHZINE)	tablet/cap	200	6.00	1,200.00
219	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 500mg amoxicillin (as trihydrate) + 125 mg potassium clavulanate per tablet (RANICLAV)	Table	500	18.50	9,250.00
220	Co-Amoxiclav (Amoxicillin+ Potassium Clavulanate) 200mg amoxicillin (as trihydrate) + 28.5mg potassium clavulanate per 5ml granules/powder for suspesion, 70ml (CLAVOXEL BID)	Bottle	17	200.00	3,400.00
221	Diphenhydramine HCl 50mg/ml, 1ml (IM, IV) (ALLERIGHT)	amp/vl	11	50.00	550.00
222	Diphenhydramine Hydrochloride 50mg (HISTAZYN)	tablet/cap	30	3.48	104.40
223	Doxycycline 100mg (as hyclate) (DOTHIX)	tablet/cap	100	10.00	1,000.00
224	Paracetamol 100mg/mL drops (alcohol free) 15 ml (NEW MYREX)	Bottle	90	30.00	2,700.00
225	Paracetamol 250mg/5mL syrup/ suspension, 60ml (alcohol-free) (4FEVER)	bottle.	100	50.00	5,000.00
226	Rabies Vaccines Purified Vero Rabies Vaccine lyophilized powder, 0.5 IU/ 1ml, vial + diluent (ID,IM) (SPEEDA)	amp/vl.	1,638	1,550.00	2,538,900.00
227	Rabies Immunoglobulin (Equine) 200 IU/mL, 5 mL vial (IM) (EQUIRAB)	amp/vl.	1,500	1,800.00	2,700,000.00
228	Tetanus Toxoid, 0.5ml (IM) (IMATET)	amp/vl.	1,600	100.00	160,000.00
229	Sterile water for injection 50ml (no preservative) (EUROMED)	bottle/bag	50	50.00	2,500.00
	DEPARTMENT OF OTORHINOLARYNGOLOGY-HEAD AND NECK SURGERY				
230	Lactated Ringer's Solution 1L (EUROMED)	bottle.	2,000	85.00	170,000.00
231	0.9% NaCl for IV Infusion solution 100 mL (SAHAR)	bottle.	332	65.00	21,580.00
232	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle.	3,000	85.00	255,000.00
233	0.9% NaCl for Irrigation solution 1L (EUROMED)	bottle.	846	85.00	71,910.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corporation
Signature Over Printed Name of Supplier / Date: May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : HO-2023-05-00927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great Green Growing

PO Number **2305037**

Purchase Order

Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
234	0.9% NaCl for IV Infusion solution 500ml (EUROMED)	bottle.	1,000	79.00	79,000.00
235	5% Dextrose in Lactated Ringer's Solution 1L (EUROMED)	bottle.	2,000	85.00	170,000.00
236	5% Dextrose in Lactated Ringer's Solution 500ml (EUROMED)	bottle.	308	79.00	24,332.00
237	5% Dextrose in 0.3% Sodium Chloride 1L (EUROMED)	bottle.	500	85.00	42,500.00
238	5% Dextrose in 0.3% Sodium Chloride 500ml (EUROMED)	bottle.	311	79.00	24,569.00
239	5% Dextrose in 0.9% Sodium Chloride 1L (EUROMED)	bottle.	2,000	85.00	170,000.00
240	5% Dextrose in Water 1L (EUROMED)	bottle.	434	85.00	36,890.00
	DANGEROUS DRUGS				
241	Nalbuphine Hydrochloride 10mg/ml, 1ml (IM, IV, SC) (NUBAIN)	amp/vl	138	163.75	22,597.50
242	Midazolam HCl 50mg/mL x3mL clear glass (IM/IV) (DORMICUM)	amp/vl	100	200.00	20,000.00
	ANESTHETICS DRUGS				
243	Lidocaine Hydrochloride 10% pump spray 50ml (XYLOCAINE)	bottle.	50	2,643.72	132,186.00
244	Lidocaine Hydrochloride 2% (20mg/ml) 5ml (IM/IV) (EUROCAINE)	amp/vl	3,000	35.00	105,000.00
245	Lidocaine Hydrochloride 2% 20mg/ml, 20ml (IM/IV) (EUROCAINE)	amp/vl	50	65.00	3,250.00
246	Lidocaine (as Hydrochloride) 2%, 1.8 mL carpule with epinephrine (ZEYCO FD)	Carpule	1,977	44.00	86,988.00
	ORAL, OPHTHALMIC, NEBULE & PSYCH. PREPARATIONS				
247	Acetylcysteine 600mg effervescent tablet (FLUIMUCIL)	Tablet	214	30.00	6,420.00
248	Ascorbic Acid 500mg, film-coated (APCEE)	tablet.	150	2.00	300.00
249	Betahistine hydrochloride 24mg (VERT)	tablet/cap	500	40.00	20,000.00
250	Calcium Carbonate 500mg tabletlet/chewable (elemental calcium) (CALSAN)	Table	175	15.00	2,625.00
251	Cefuroxime axetil 500mg (AEROX)	tablet/cap	298	15.00	4,470.00
252	Celecoxib 200mg (EMICOX)	tablet/cap	952	7.75	7,378.00
253	Cetirizine dihydrochloride 10mg (SAPHZINE)	tablet/cap	100	6.00	600.00
254	Chlorhexidine Gluconate 0.12% and 4%, 120 mL (ORAHEX)	bottle.	820	164.00	134,480.00
255	Ciprofloxacin hydrochloride 500mg (CYFROX)	tablet/cap	322	15.00	4,830.00
256	Clarithromycin 500mg (KLARITHIX)	tablet/cap	156	40.00	6,240.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : MA 2023 05- 03927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order

Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
257	Clindamycin 75mg/5ml granules for suspension, 60 ml (as palmitate Hydrochloride) (DALACIN C)	bottle.	436	700.00	305,200.00
258	Cloxacillin Sodium 500mg (PHILCLOX)	tablet/cap	500	10.00	5,000.00
259	Clindamycin Hydrochloride 300mg (ACRESIL)	tablet/cap	2,000	10.00	20,000.00
260	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 400 mg amoxicillin (as trihydrate) + 57 mg potassium clavulanate per 5mL granules/powder for suspension, 70ml (MEOXICLAV DS)	bottle.	286	280.00	80,080.00
261	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 500mg amoxicillin (as trihydrate) + 125 mg potassium clavulanate per tabletlet (RANICLAV)	Tablet	3,918	18.50	72,483.00
262	Erythromycin eye ointment 0.5% 5g (OPTRYL)	Tube	100	230.00	23,000.00
263	Ferrous sulfate 60mg + Folic Acid 400mcg (FERGLOBIN FA)	tablet/cap	100	6.00	600.00
264	Fluticasone (as propionate) 0.05%/dose x 120 doses Nasal Aqueous Solution (FLUTIMATE NS)	Bottle	1,000	450.00	450,000.00
265	Lansoprazole 30 mg (LANVELL)	tablet/cap	10	50.00	500.00
266	Levofloxacin 500mg (TEVOLOX)	tablet/cap	124	45.00	5,580.00
267	Mefenamic acid 500mg (MECID)	tablet/cap	30	5.00	150.00
268	Montelukast (as sodium salt) 10mg (LEUKOREX)	tablet/cap	25	20.00	500.00
269	Mupirocin Ointment 2%, 5g (BACTRIGON)	Tube	328	200.00	65,600.00
270	Omeprazole 20mg (OMEPHIL-20)	tablet/cap	685	25.00	17,125.00
271	Omeprazole 40mg (RANZOLE)	tablet/cap	291	35.00	10,185.00
272	Oxymetazoline (as hydrochloride) 0.05%, 15ml Nasal Spray (DRIXINE)	Bottle	700	342.00	239,400.00
273	Paracetamol 500mg (ANASERAN)	tablet/cap	533	3.25	1,732.25
274	Paracetamol 250 mg/5ml syrup/suspension, 60ml (alcohol-free) (P4FEVER)	Bottle	1,000	50.00	50,000.00
275	Polymyxin B (as sulfate) 10,000 units + Neomycin (as sulfate) 3.5 mg + Fluocinolone Acetonide 0.025%, Otic Soln., 5ml (APLOSYN - OTIC)	bottle.	2,000	500.00	1,000,000.00
276	Povidone Iodine 1% oral antiseptic 60ml (ALFA GARGLE)	Bottle	300	89.00	26,700.00
277	Prednisone 10mg (PRESONE)	tablet/cap	92	5.75	529.00
278	Prednisone 20mg (PROLIX)	tablet/cap	90	7.75	697.50

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.

Signature Over Printed Name of Supplier / Date May 25, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NA-2023-05-03727

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order

Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	; 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
279	Salbutamol (as sulfate) Solution for nebulization 1mg/ml, 2.5ml (unit dose) (HIVENT)	Nebule	376	18.00	6,768.00
280	Salbutamol (as sulfate) Solution for nebulization 2mg/ml, 2.5ml (unit dose) (HIVENT DS)	nebule	672	20.00	13,440.00
281	Tramadol Hydrochloride 50mg (GESITRAM)	tablet/cap	223	10.00	2,230.00
282	Tranexamic acid 500mg (DLI)	tablet/cap	258	10.00	2,580.00
283	Vitamin B1 100mg, B6 5mg, B12 50mcg (B-complex) (RAPID-B100)	tablet/cap	2,000	8.00	16,000.00
284	Sodium chloride 0.65% saline solution for nasal spray (MOCUNASE)	bottle	200	93.00	18,600.00
285	Lidocaine + Phenylephrine 50mg/5mg nasal spray (C-PHENYLCAINE FORTE) IM/IV PREPARATIONS	Bottle	100	2,990.00	299,000.00
286	Calcium Gluconate 10%, 10 mL (IV) (EUROMED)	amp/vl	277	60.00	16,620.00
287	Ceftriaxone Sodium 1gm + 10ml diluent (IV) (KEPTRIX)	amp/vl	81	350.00	28,350.00
288	Cefuroxime Sodium 750mg (IM, IV) (NEOCEFUXIME)	amp/vl	1,000	200.00	200,000.00
289	Ciprofloxacin 400mg/200mL (IV infusion) or 2mg/ml, 200ml (CIPRONAT)	amp/vl	333	450.00	149,850.00
290	Clindamycin Phosphate 150mg/ml, 4ml (IM, IV) (CLINDARENE)	amp/vl	2,500	300.00	750,000.00
291	Dexamethasone 4 mg/mL, 2 mL ampul/vial (IM, IV) (as sodium phosphate) (DEXAMAX)	amp/vl	79	50.00	3,950.00
292	Epinephrine (adrenaline) Hydrochloride 1mg/ml, 1ml (IM, SC) (GRAND PHARMA)	amp/vl	633	80.00	50,640.00
293	Gentamicin Sulfate 40mg/ml, 2ml (IM, IV) (GENTACARE)	amp/vl	3	30.00	90.00
294	Ketorolac tromethamol 30mg/ml, 1ml (IM, IV) (ANALAC)	amp/vl	216	120.00	25,920.00
295	Metronidazole 5mg/ml, 100ml (IV infusion) (EUROMET)	bottle.	712	60.00	42,720.00
296	Nicardipine Hydrochloride 1mg/ml, 10ml (IV) (NICAPEDZ)	amp/vl	168	645.75	108,486.00
297	Paracetamol 150 mg/mL, 2mL ampule solution for injection (IM/IV) (AMCETAM)	amp/vl	493	20.00	9,860.00
298	Penicillin G Crystalline (benyzylpenicillin sodium) 1,000,000 units (IM/IV) (CATHAY)	amp/vl	1,161	27.68	32,136.48
299	Penicillin G Crystalline (benyzylpenicillin sodium) 5,000,000 units (IM/IV) (LAKESIDE)	amp/vl	1,000	30.00	30,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : 100-2023-05-07477

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL **Delivery Schedule :** Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
300	Ranitidine Hydrochloride 25mg/ml, 2ml (IM, IV, IV infusion) (RANITEIN)	amp/vl.	141	25.00	3,525.00
301	Sterile Water for Injection 50ml (no preservative) (EUROMED)	bottle	616	50.00	30,800.00
302	Tramadol Hydrochloride 50mg/ml, 2ml (IM, IV, SC) (AMBIDOL)	amp/vl	1,500	50.00	75,000.00
303	Tranexamic Acid 100mg/ml, 5ml (IM, IV) (ANCLOTIC)	amp/vl	500	100.00	50,000.00
	EMERGENCY ROOM				
304	Lactated Ringer's Solution 1L (EUROMED)	bottle	3,000	85.00	255,000.00
305	Lactated Ringer's Solution 500ml (EUROMED)	bottle	792	79.00	62,568.00
306	Mannitol 20% 500ml (BBRAUN)	bottle	500	205.00	102,500.00
307	Modified Fluid Gelatin 4% 500ml solution (GELOFUSINE)	bottle	500	1,150.00	575,000.00
308	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle	2,310	85.00	196,350.00
309	0.9% NaCl for IV Infusion solution 500ml (EUROMED)	bottle	500	78.00	39,000.00
310	5% Dextrose in 0.3% Sodium Chloride 1L (EUROMED)	bottle	264	85.00	22,440.00
311	5% Dextrose in 0.3% Sodium Chloride 500ml (EUROMED)	bottle	500	79.00	39,500.00
312	5% Dextrose in Balance Multiple Maintenance Solution (NM) 1L (EUROMED)	bottle	141	85.00	11,985.00
313	5% Dextrose in Balance Multiple Maintenance Solution (NM) 500ml (EUROMED)	bottle	200	79.00	15,800.00
314	5% Dextrose in Balance Multiple Maintenance Solution (IMB) 500ml (EUROMED)	bottle	176	79.00	13,904.00
315	5% Dextrose in Water 500ml (EUROMED)	bottle	500	79.00	39,500.00
316	10% Dextrose in Water 500ml (EUROMED)	bottle	354	79.00	27,966.00
317	Isotonic Electrolyte Sodium Chloride 1L (STEROFUNDIN)	bottle	381	320.00	121,920.00
	DANGEROUS DRUG				
318	Diazepam 5 mg/mL, 2 mL (IM, IV) (VALIUM)	amp/vl	500	105.00	52,500.00
319	Fentanyl Citrate 50mcg/ml, 2ml (IV) (SUBLIMAZE)	amp/vl	50	120.00	6,000.00
320	Ketamine Hydrochloride 50 mg/mL, 10 mL (IM, IV) (KETAMAX)	amp/vl	41	2,000.00	82,000.00
321	Midazolam 5mg/ml, 1ml (IM, IV) (DORMICUM)	amp/vl	50	105.35	5,267.50
322	Morphine Sulfate 10mg (HIZON)	tablet/cap	100	55.00	5,500.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanna D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NA-2023-05-00933

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL **Delivery Schedule :** Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
323	Pethidine Hydrochloride 50 mg/mL, 2 mL (IM, IV, SC) (DEMETOR)	amp/vl	50	450.00	22,500.00
324	Phenobarbital 130mg/ml, 1 mL (IM, IV) (PFIZER)	ampule	50	596.00	29,800.00
	ANESTHETICS DRUGS				
325	Atracurium Besylate 10mg/ml, 2.5ml (ATRA-CURE)	amp/vl	38	230.00	8,740.00
326	Atropine Sulfate 1mg/ml, 1ml (IM/IV/SC) (TROPIN)	amp/vl	17	40.00	680.00
327	Lidocaine Hydrochloride 10% pump spray 50ml (XYLOCAINE)	bottle	10	2,643.72	26,437.20
328	Lidocaine Hydrochloride 2% (20mg/ml) 5ml (IM/IV) (EUROMED)	amp/vl	200	35.00	7,000.00
329	Naloxone Hydrochloride 400 mcg/ml, 1 ml (IM/IV/SC) (NALOCURE)	amp/vl	30	1,400.00	42,000.00
330	Propofol 10mg/ml, 20ml (IV) (IV PRO)	amp/vl	46	350.00	16,100.00
	ORAL, OPHTHALMIC, NEBULE & PSYCH. PREPARATIONS				
331	Aspirin 80mg (SAPHRIN)	tablet/cap	1,666	2.00	3,332.00
332	Budesonide 250mcg/ml, 2ml (unit dose) for nebulization (BREECORT)	nebule	1,347	80.75	108,770.25
333	Captopril 25mg (HYPERSTOP)	tablet/cap	1,031	5.50	5,670.50
334	Clopidogrel 75mg (CLOPIVAZ)	tablet/cap	84	20.00	1,680.00
335	Ipratropium + Salbutamol (for nebulization) 500 micrograms ipratropium (as bromide anhydrous) + 2.5 mg salbutamol (as base) x 2.5 mL (unit dose) (HIVENT PLUS)	nebule	3,726	27.00	100,602.00
336	Isosorbide Dinitrate 5mg (sublingual) (SORBANCE)	tablet/cap	1,358	20.00	27,160.00
337	Metoprolol (as tartrate) 50mg (PROMETIN)	tablet/cap	2,380	3.00	7,140.00
338	Nifedipine 10mg (NICARDIA)	tablet/cap	653	4.00	2,612.00
339	Oral Rehydration Salts (ORS 75 replacement) Sodium chloride 2.6 g, Trisodium citrate dihydrate 2.9 g, Potassium chloride 1.5 g, Glucose anhydrous 13.5 g, Total Weight — 20.5 g, Sodium 75 (DEHYDROSOL)	sachet	278	5.00	1,390.00
340	Paracetamol 250mg suppository (PORO)	supp	1,000	21.00	21,000.00
341	Salbutamol (as sulfate) Solution for nebulization 2mg/ml, 2.5ml (unit dose) (HIVENT DS)	nebule	3,364	20.00	67,280.00
342	Adenosine 3 mg/ml, 2ml (IV) (ADESAN)	amp/vl	50	1,100.00	55,000.00
343	Amiodarone Hydrochloride 50mg/ml, 3ml (IV) (EURYTHMIC)	amp/vl	144	321.25	46,260.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NA-2023-05-09427

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
344	Anti-tetanus serum (equine) 1500 IU/mL, 0.7 mL vial/ampule (IM) (ANTITET)	amp/vl	1,290	140.00	180,600.00
345	Calcium Gluconate 10%, 10 mL (IV) (EUROMED)	amp/vl	27	60.00	1,620.00
346	Ceftriaxone Sodium 1gm + 10ml diluent (IV) (KEPTRIX)	amp/vl	357	350.00	124,950.00
347	Clonidine Hydrochloride 75mcg (CLODIN)	tablet/cap	1,000	20.00	20,000.00
348	Dextrose 50% solution for injection 50ml (EUROMED)	amp/vl	580	65.00	37,700.00
349	Digoxin 250mcg/ml, 2ml (IM, IV) (CARDIOXIN)	amp/vl	50	230.00	11,500.00
350	Diphenhydramine Hydrochloride 50mg/ml, 1ml (IM, IV) (ALLERIGHT)	amp/vl	101	50.00	5,050.00
351	Dopamine Hydrochloride 800 mcg/ml, 250ml D5W (pre-mixed) (IV) (MYOCARD-DX)	amp/vl	500	699.00	349,500.00
352	Dopamine Hydrochloride 40mg/ml, 5ml (IV) (DOPINE)	amp/vl	235	140.00	32,900.00
353	Enoxaparin Sodium 100mg/ml, 0.4ml pre-filled syringe (SC) (LOMOH-40)	p-syr.	238	46.00	10,948.00
354	Epinephrine (adrenaline) Hydrochloride 1mg/ml, 1ml (IM, SC) (GRAND PHARMA)	amp/vl	1,266	80.00	101,280.00
355	Furosemide 10mg/ml, 2ml (IM, IV) (FUROSAN)	amp/vl	625	25.00	15,625.00
356	Heparin (unfractionated) sodium 5000iu/ml; 5ml (IV infusion, SC) (bovine origin) (APRINOL 25000)	vial	18	300.00	5,400.00
357	Hydrocortisone Sodium Succinate 100mg (IV) (CORTEF)	vial	9	120.00	1,080.00
358	Hydrocortisone Sodium Succinate 250mg (IV) (GORTIZONE)	vial	253	180.00	45,540.00
359	Hyoscine N Butyl Bromide 20mg/ml, 1ml (IM, IV, SC) (SPASBASCINE)	ampule	464	60.00	27,840.00
360	Isophane Insulin Human (recombinant DNA) 100 IU/mL, 10 mL (WOSULIN N)	vial	22	500.00	11,000.00
361	Isosorbide Dinitrate 1mg/ml, 10ml (IV) (ISOKET)	ampule	300	653.25	195,975.00
362	Isosorbide Dinitrate 5mg (sublingual) (ISORDIL)	tablet/cap	923	20.00	18,460.00
363	Magnesium Sulfate (as heptahydrate) 250mg/ml, 20ml (IV) (EUROMED)	amp/vl	36	60.00	2,160.00
364	Metoclopramide Hydrochloride 5mg/ml, 2ml (IM, IV) (METOCLOSIL)	amp/vl	1,500	30.00	45,000.00
365	Nicardipine Hydrochloride 1mg/ml, 10ml (IV) (NICAPEDZ)	amp/vl	500	645.75	322,875.00
366	Nitroglycerin (Glyceryl trinitrate) 1 mg/ml, 10 ml (NITROSAN)	amp/vl	300	420.00	126,000.00
367	Norepinephrine bitartrate 1mg/ml, 4 ml (IV infusion) (QUPRIN)	amp/vl	875	600.00	525,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : No. 2023 05 0922

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
368	Omeprazole powder 40mg + 10ml solvent (IV) (RANZOLE)	amp/vl	1,010	250.00	252,500.00
369	Paracetamol 10mg/ml, 100ml solution for infusion (IV) (THERMODOL IV)	amp/vl	1,100	429.00	471,900.00
370	Paracetamol 150 mg/mL, 2mL amp soln for injection (IM/IV) (AMCETAM)	ampule	986	20.00	19,720.00
371	Phytomenadione 10 mg/mL, 1 mL (IM, IV, SC) (as mixed micelle) (AMBIVIT K)	amp/vl	40	40.00	1,600.00
372	Potassium Chloride 2mEq/ml, 20ml (IV Infusion) (EUROMED)	amp/vl	30	48.75	1,462.50
373	Ranitidine Hydrochloride 25mg/ml, 2ml (IM, IV, IV infusion) (RANITEIN)	amp/vl	1,414	25.00	35,350.00
374	Regular, Insulin (recombinant DNA human) 100 IU/mL, 10 mL (SC, IV/IM) (WOSULIN R)	amp/vl	35	500.00	17,500.00
375	Sodium Bicarbonate 1mEq/ml, 50ml (adult) (IV infusion) (HOSPIRA)	amp/vl	500	159.75	79,875.00
376	Sodium Hyaluronate 0.1% (1mg/mL), 5ml Ophthalmic Solution (LACRIFRESH)	bottle	200	339.00	67,800.00
377	Sterile Water for injection 50ml (no preservative) (EUROMED)	bottle	500	50.00	25,000.00
378	Tetanus Toxoid, 0.5 mL (IM) (IMATET)	amp/vl	1,272	100.00	127,200.00
379	Tramadol Hydrochloride 50mg/ml, 1ml (IM, IV, SC) (PEPTRAD)	amp/vl	3,000	75.00	225,000.00
380	Tranexamic Acid 100mg/ml, 5ml (IM, IV) (ANCLOTIC)	amp/vl	200	100.00	20,000.00
381	Verapamil Hydrochloride 2.5mg/ml, 2ml (IV) (ISOPTIN)	amp/vl	28	150.00	4,200.00
382	Phenytoin 50mg/ml, 2ml solution for injection (LANTIDIN)	amp/vl	55	850.00	46,750.00
383	Dobutamine 250mg/5ml (DOBUKON)	amp/vl	100	300.00	30,000.00
384	Protamine Sulfate 10 mg/mL, 5 mL Ampule (PROSULF)	amp/vl	56	1,950.00	109,200.00
385	Streptokinase 15 IU (THROMBOFLUX)	amp/vl	24	6,300.00	151,200.00
386	Esmolol 10mg/ml IV (ESOBLOC)	amp/vl	100	850.00	85,000.00
387	Potassium Chloride 600mg (K-LYTE)	tablet/cap	153	15.50	2,371.50
388	Tetanus Immunoglobulin (human) 250 IU/mL pre-filled syringe (IM) (TETAGAM)	p-syr	29	1,100.00	31,900.00
389	Hydralazine 20 mg/mL, 1 mL Solution for Injection Ampule (APREZAL)	Ampule	500	135.00	67,500.00
	FAMILY MEDICINE DEPARTMENT ORAL,OPHTHALMIC,NEBULE & PSYCH. PREPARATIONS				
390	Acetylcysteine 600mg effervescent tablet (FLUIMUCIL)	tablet	493	30.00	14,790.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : Nov. 2022 05- 03927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
391	Aciclovir 400 mg (SYCLOVIR)	tablet/cap	200	45.00	9,000.00
392	Aciclovir 800 mg (SYCLOVIR)	tablet/cap	100	70.00	7,000.00
393	Amlodipine besilate 10mg (AMBESYL)	tablet/cap	1,000	8.75	8,750.00
394	Amlodipine besilate 5mg (AMBESYL)	tablet/cap	1,000	6.45	6,450.00
395	Amoxicillin Trihydrate 500mg (AMBIMOX)	tablet/cap	445	7.50	3,337.50
396	Ascorbic Acid 500mg, film-coated (APCEE)	tablet/cap	1,500	2.00	3,000.00
397	Aspirin 80mg (SAPHRIN)	tablet/cap	150	2.00	300.00
398	Azithromycin 500mg (as monohydrate) (AZITHVA)	tablet/cap	150	40.00	6,000.00
399	Betahistine hydrochloride 8mg (VERT)	tablet/cap	100	23.00	2,300.00
400	Betahistine hydrochloride 24mg (VERT)	tablet/cap	150	40.00	6,000.00
401	Betamethasone Cream 0.1%, 5g tube (as valerate) (BETNOVATE)	tube	70	343.50	24,045.00
402	Bisacodyl 10 mg (adult) suppository (VESILAC)	supp.	70	25.00	1,750.00
403	Budesonide 160mcg + Formoterol 4.5mcg (as fumarate dihydrate) x 60 doses with dispenser (DPI) (SYMBICORT)	bottle.	15	1,473.00	22,095.00
404	Budesonide 250mcg/ml, 2ml (unit dose) for nebulization (BREECORT)	nebule	25	80.75	2,018.75
405	Butamirate Citrate 50mg MR (COFMED)	tablet/cap	500	15.00	7,500.00
406	Calcium Carbonate 500mg tablet/chewable (elemental calcium) (CALSAN)	tablet	150	15.00	2,250.00
407	Captopril 25mg (HYPERSTOP)	tablet/cap	750	5.50	4,125.00
408	Carvedilol 6.25mg (DILABLOC)	tablet/cap	800	7.25	5,800.00
409	Cefuroxime axetil 500mg (AEROX)	tablet/cap	186	15.00	2,790.00
410	Celecoxib 200mg (EMICOX)	tablet/cap	250	7.75	1,937.50
411	Cetirizine dihydrochloride 10mg (MEDRIZINE)	tablet/cap	250	6.00	1,500.00
412	Chlorhexidine Gluconate 0.12% , 120 mL (ORAHEX)	bottle	35	164.00	5,740.00
413	Clopidogrel 75mg (CLOPIVAZ)	tablet/cap	117	20.00	2,340.00
414	Ciprofloxacin hydrochloride 500mg (CYFROX)	tablet/cap	500	15.00	7,500.00
415	Clarithromycin 500mg (KLARITHIX)	tablet.	250	40.00	10,000.00
416	Clindamycin Hydrochloride 300mg (ACRESIL)	cap.	250	10.00	2,500.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanna D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date
May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO. 2023 05-0932

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: **QUEZON CITY GENERAL HOSPITAL**	Project Number	:CONSO-23-DM-0712
Company Name	: **PLANET DRUGSTORE CORPORATION**	Mode of Procurement	:Public Bidding
Address	: **137 Marina Street, Balong Bato, San Juan City**	Resolution No.	:23-PB-258
Business Type	: **Corporation Registration #CS200708928**	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
417	Clonidine Hydrochloride 75mcg (CLODIN)	tablet.	350	20.00	7,000.00
418	Cloxacillin Sodium 500mg (PHILCLOX)	tablet/cap	350	10.00	3,500.00
419	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 500mg amoxicillin (as trihydrate) + 125 mg potassium clavulanate per tablet (RANICLAV)	tablet	350	18.50	6,475.00
420	Diphenhydramine Hydrochloride 50mg (HISTAZYN)	tablet/cap	150	3.48	522.00
421	Diphenhydramine Hydrochloride 25 mg (BENADRYL AH)	tablet/cap	150	22.25	3,337.50
422	Domperidone 10mg (TORIDON)	tablet/cap	150	16.50	2,475.00
423	Doxycycline 100mg (as hyclate) (DOTHIX)	tablet/cap	100	10.00	1,000.00
424	Ferrous sulfate 60mg + Folic Acid 400mcg (FERGLOBIN FA)	tablet/cap	350	5.00	1,750.00
425	Ferrous sulfate 60mg > 325mg elemental iron (FERRICORE)	tablet/cap	350	3.00	1,050.00
426	Fluconazole 50mg (MYCOZOLE)	tablet/cap	35	160.00	5,600.00
427	Fluconazole 200mg (DIFLUCAN)	tablet/cap	35	1,000.00	35,000.00
428	Fluticasone (as propionate) + Salmeterol (as xinafoate) 50 micrograms fluticasone + 25 micrograms salmeterol x 120 actuations (with dose counter*) (SERETIDE)	bottle.	35	560.00	19,600.00
429	Fluticasone (as propionate) + Salmeterol (as xinafoate) 250 micrograms fluticasone + 25 micrograms salmeterol x 120 actuations (FORAIR)	bottle.	35	498.00	17,430.00
430	Fluticasone (as propionate) + Salmeterol (as xinafoate) 250 micrograms fluticasone + 50 micrograms salmeterol x 60 doses with dispenser DPI (SALMEFLO DPI)	bottle.	35	520.00	18,200.00
431	Furosemide 20mg (DLI)	tablet/cap	413	3.00	1,239.00
432	Furosemide 40mg (FUROMED)	tablet/cap	600	5.00	3,000.00
433	Gabapentin 100mg (GABIX)	tablet/cap	200	27.00	5,400.00
434	Gliclazide 80mg (GLICAMED)	tablet/cap	450	4.00	1,800.00
435	Hyoscine N Butyl Bromide 10mg (HIOSPAN)	tablet/cap	500	10.00	5,000.00
436	Ipratropium + Salbutamol (for nebulization) 500 micrograms ipratropium (as bromide anhydrous) + 2.5 mg salbutamol (as base) x 2.5 mL (unit dose) (HIVENT PLUS)	nebule	70	27.00	1,890.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date: May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO. 2023 05- 03927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
437	Ipratropium (as bromide) (for nebulization) 250 micrograms/mL, 2 mL (unit dose) (ATROVENT)	neb	40	135.75	5,430.00
438	Irbesartan 150mg (VIRBEZ)	tablet/cap	400	20.00	8,000.00
439	Irbesartan 300mg (VIRBEZ)	tablet/cap	300	22.00	6,600.00
440	Isosorbide Mononitrate 30mg MR (ISMODIN)	tablet/cap	150	11.75	1,762.50
441	Isosorbide Dinitrate 5mg (sublingual) (SORBANCE)	tablet/cap	138	20.00	2,760.00
442	Lactulose 3.3 g/5 mL (66%) syrup, 120 mL (LAXAC)	tablet/cap	15	280.00	4,200.00
443	Lagundi 300mg (ASFLEM)	tablet/cap	600	4.00	2,400.00
444	Lansoprazole 30 mg (LANVELL)	tablet/cap	140	50.00	7,000.00
445	Levofloxacin 500mg (TEVOLOX)	tablet/cap	54	45.00	2,430.00
446	Levothyroxine Na 50mcg (THYDIN)	tablet/cap	100	7.00	700.00
447	Levothyroxine Na 100mcg (THYDIN)	tablet/cap	100	12.00	1,200.00
448	Loratadine 10mg / film coated (LORASAPH)	tablet/cap	200	9.00	1,800.00
449	Losartan 50mg (as potassium salt) (VIVASARTAN)	tablet/cap	600	7.00	4,200.00
450	Losartan 100mg (as potassium salt) (VIVASARTAN)	tablet/cap	500	8.00	4,000.00
451	Losartan K 50mg + Hydochlorthiazide 12.5mg (LOSAWIN-H)	tablet/cap	200	10.00	2,000.00
452	Mefenamic acid 500mg (MECID)	tablet/cap	200	5.00	1,000.00
453	Metformin (as hydrochloride) 500mg/film coated (GLYFORMET)	tablet/cap	1,500	4.75	7,125.00
454	Metronidazole 500mg (MEDGYL)	tablet/cap	400	5.00	2,000.00
455	Metoprolol (as tartrate) 50mg (PROMETIN)	tablet/cap	95	3.00	285.00
456	Metoprolol (as tartrate) 100mg (PROMETIN)	tablet/cap	94	5.00	470.00
457	Montelukast (as sodium salt) 5mg Chewable (BRONAST)	table	140	10.00	1,400.00
458	Montelukast (as sodium salt) 10mg (LEUKOREX)	tablet/cap	140	20.00	2,800.00
459	Multivitamins Adult Vit A: 600-700mcg or 2,000-2,500 IU, Vit B1: 1.3-1.7mg, Vit B2: 0.7-3mg, Vit B6: 1.6-2mg, Vit B12: 2-6mcg, Vit C: 65-80mg, Vit D: 400 IU (10 mcg) (MULTIGEN)	tablet/cap	280	5.00	1,400.00
460	Mupirocin Ointment 2%, 5g (BACTRIGON)	tube	14	200.00	2,800.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanna D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : No. 2023-05-01927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
461	Naproxen Sodium 550mg (FLANAX FORTE)	tablet/cap	150	30.00	4,500.00
462	Nifedipine 30mg MR (ADALAT GITS 30)	tablet/cap	50	44.40	2,220.00
463	Nifedipine 10mg (NICARDIA)	tablet/cap	300	4.00	1,200.00
464	Ofloxacin 200mg (FLOXA-200)	tablet/cap	50	10.00	500.00
465	Omeprazole 40mg (RANZOLE)	tablet/cap	200	35.00	7,000.00
466	Oral Rehydration Salts (ORS 75 replacement) Sodium chloride 2.6 g, Trisodium citrate dihydrate 2.9 g, Potassium chloride 1.5 g, Glucose anhydrous 13.5 g, Total Weight — 20.5 g, Sodium 75 (DEHYDROSOL)	sachet	175	5.00	875.00
467	Paracetamol 500mg (ANASERAN)	tablet/cap	700	3.25	2,275.00
468	Permethrin lotion 5% 60ml (LINDELL)	bottle	30	320.00	9,600.00
469	Povidone Iodine 1% oral antiseptic 60ml (ALFA GARGLE)	bottle	15	89.00	1,335.00
470	Prednisone 5mg (ORAPRED)	tablet/cap	210	2.40	504.00
471	Prednisone 10mg (PRESONE)	tablet/cap	210	5.75	1,207.50
472	Prednisone 20mg (PROLIX)	tablet/cap	210	7.75	1,627.50
473	Quetiapine (as Fumarate) 25mg (QTIPINE 25)	tablet/cap	100	30.00	3,000.00
474	Rifaximin 200mg (NORMIX)	tablet.	40	110.00	4,400.00
475	Rosuvastatin (as calcium salt) 10mg (AURORA)	tablet/cap	100	12.00	1,200.00
476	Rosuvastatin (as calcium salt) 20mg (AURORA)	tablet/cap	140	16.00	2,240.00
477	Sambong [Blumea balsamifera(Fam. Compositae)] 500mg (MIA-FORTE)	tablet/cap	280	7.00	1,960.00
478	Salbutamol (as sulfate) Solution for nebulization 1mg/ml, 2.5ml (unit dose) (HIVENT)	nebule	150	18.00	2,700.00
479	Salbutamol (as sulfate) Solution for nebulization 2mg/ml, 2.5ml (unit dose) (HIVENT DS)	nebule	100	20.00	2,000.00
480	Salbutamol 100 mcg/dose x 200 doses Metered Dose Inhaler (DERIHALER)	bottle.	15	260.00	3,900.00
481	Simvastatin 40mg (ZIMVAST)	tablet.	207	20.00	4,140.00
482	Tamsulosin Hydrochloride 200mcg, orally disintegrating tablet (URILAX)	tablet	100	25.00	2,500.00
483	Telmisartan 40mg (MISTACOR)	tablet	150	23.00	3,450.00
484	Telmisartan 80mg (MISTACOR)	tablet.	150	34.00	5,100.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet DrugStore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : NCA 2023 05 03927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
485	Tobramycin 0.3%+Dexamethasone 0.01%, 5ml Eye drops (CELSUS)	tablet.	15	230.00	3,450.00
486	Tobramycin Eye drops solution 0.3%, 5ml (CELSUS)	bottle.	15	215.00	3,225.00
487	Tramadol Hydrochloride 50mg (GESITRAM)	bottle.	240	10.00	2,400.00
488	Tranexamic acid 500mg (DLI)	cap.	120	10.00	1,200.00
489	Valsartan 80mg film coated (VALAZYD)	cap.	120	23.50	2,820.00
490	Vitamin B1 100mg, B6 5mg, B12 50mcg (B-complex) (RAPID-B100)	tablet/cap	1,500	8.00	12,000.00
491	Pneumococcal Polyvalent Vaccine, 25mcg/0.5mL, 0.5ml (polysaccharide) prefilled syringe or single dose vial (IM, SC) (PNEUMOVAX23)	tablet/cap	100	2,200.00	220,000.00
	GERIATRIC DEPARTMENT				
	I.V. FLUIDS				
492	0.9% NaCl for IV Infusion solution 100 mL (SAHAR)	bottle.	140	65.00	9,100.00
493	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle.	420	85.00	35,700.00
494	5% Dextrose in Lactated Ringer's Solution 1L (EUROMED)	bottle.	140	85.00	11,900.00
495	5% Dextrose in Lactated Ringer's Solution 500ml (EUROMED)	bottle.	140	79.00	11,060.00
496	5% Dextrose in 0.3% Sodium Chloride 1L (EUROMED)	bottle.	140	85.00	11,900.00
497	5% Dextrose in 0.3% Sodium Chloride 500ml (EUROMED)	bottle.	280	79.00	22,120.00
498	5% Dextrose in 0.9% Sodium Chloride 1L (EUROMED)	bottle.	399	85.00	33,915.00
499	5% Dextrose in Balance Multiple Maintenance Solution (NM) 1L (EUROSOL-M)	bottle.	280	85.00	23,800.00
500	10% Dextrose in Water 500ml (EUROMED)	bottle.	280	79.00	22,120.00
	DANGEROUS DRUGS				
501	Diazepam 5 mg/mL, 2 mL (IM, IV) (VALIUM)	amp/vl	50	105.00	5,250.00
502	Midazolam 5mg/ml, 1ml (IM, IV) (DORMICUM)	amp/vl	50	105.35	5,267.50
503	Midazolam 5mg/ml, 3ml (IM, IV) (DORMICUM)	amp/vl	50	200.00	10,000.00
504	Morphine Sulfate 16mg/ml, 1ml (IM, IV) (HIZON)	amp/vl	50	122.25	6,112.50
	ANESTHETICS DRUGS				
505	Atropine Sulfate 1mg/ml, 1ml (IM/IV/SC) (TROPIN)	amp/vl	100	40.00	4,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : No. 2023 05- 03927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
506	Esmolol Hydrochloride 100mg/ml, 10ml (ESOBLOC)	amp/vl	100	850.00	85,000.00
507	Lidocaine Hydrochloride 2% (20mg/ml) 5ml (IM/IV) (EUROCAINE)	amp/vl	30	35.00	1,050.00
508	Lidocaine Hydrochloride 2% 20mg/ml, 20ml (IM/IV) (EUROCAINE)	amp/vl	30	65.00	1,950.00
	ORAL,OPHTHALMIC,NEBULE & PSYCH. PREPARATIONS				
509	Acetylcysteine 600mg effervescent tablet (FLUIMUCIL)	tablet	1,381	30.00	41,430.00
510	Alprazolam 250mcg (ALTROX)	tablet/cap	50	21.00	1,050.00
511	Amlodipine besilate 5mg (AMBESYL)	tablet/cap	10,000	6.45	64,500.00
512	Amoxicillin Trihydrate 500mg (AMBIMOX)	tablet/cap	623	7.50	4,672.50
513	Ascorbic Acid 500mg, film-coated (APCEE) ✓	tablet/cap	140	2.00	280.00
514	Aspirin 80mg (SAPHRIN)	tablet/cap	1,000	1.50	1,500.00
515	Azithromycin 500mg (as monohydrate) (AZITHVA)	tablet/cap	280	40.00	11,200.00
516	Betahistine hydrochloride 24mg (VERT)	tablet/cap	140	40.00	5,600.00
517	Betamethasone Cream 0.1%, 5g tube (as valerate) (BETNOVATE)	tablet/cap	70	343.50	24,045.00
518	Biperiden hydrochloride 2mg (BIZYX)	tablet/cap	70	16.00	1,120.00
519	Bisacodyl 10 mg (adult) suppository (VESILAC)	supp	140	25.00	3,500.00
520	Budesonide 160mcg + Formoterol 4.5mcg (as fumarate dihydrate) x 60 doses with dispenser (DPI) (SYMBICORT)	bottle.	140	1,473.00	206,220.00
521	Budesonide 160mcg + Formoterol 4.5mcg (as fumarate dihydrate) x 60 doses with dispenser (DPI) (SYMBICORT)	bottle	140	1,473.00	206,220.00
522	Budesonide 250mcg/ml, 2ml (unit dose) for nebulization (BREECORT)	nebule	140	80.75	11,305.00
523	Butamirate Citrate 50mg MR (COFMED)	tablet.	140	15.00	2,100.00
524	Calcium Carbonate 500mg tabletlet/chewable (elemental calcium) (CALSAN)	tablet	70	15.00	1,050.00
525	Captopril 25mg (HYPERSTOP)	tablet/cap	52	5.50	286.00
526	Carbamazepine 200mg (MEZACAR)	tablet/cap	50	10.00	500.00
527	Carvedilol 6.25mg (DILABLOC)	tablet/cap	140	7.25	1,015.00
528	Cefixime 200mg (CEFIXIME 200MG)	tablet/cap	280	65.00	18,200.00
529	Cefuroxime axetil 500mg (AEROX)	tablet/cap	104	15.00	1,560.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : No. 2023-05-03907

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
530	Celecoxib 200mg (EMICOX)	tablet/cap	140	7.75	1,085.00
531	Cetirizine dihydrochloride 10mg (SAPHZINE)	tablet/cap	140	6.00	840.00
532	Chlorhexidine Gluconate 0.12% and 4%, 120 mL (ORAHEX)	bottle.	70	164.00	11,480.00
533	Clopidogrel 75mg (CLOPIVAZ)	tablet/cap	3,922	20.00	78,440.00
534	Ciprofloxacin hydrochloride 500mg (CYFROX)	tablet/cap	100	15.00	1,500.00
535	Clarithromycin 500mg (KLARITHIX)	tablet/cap	100	40.00	4,000.00
536	Clindamycin Hydrochloride 300mg (ACRESIL)	tablet/cap	100	10.00	1,000.00
537	Cloxacillin Sodium 500mg (PHILCLOX)	tablet/cap	100	10.00	1,000.00
538	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 500mg amoxicillin (as trihydrate) + 125 mg potassium clavulanate per tablet (RANICLAV)	tablet	280	18.50	5,180.00
539	Digoxin 250 mcg (INOXIN)	tablet/cap	140	4.25	595.00
540	Domperidone 10mg (APULDON)	tablet/cap	200	16.50	3,300.00
541	Donepezil 10 mg/orodispersible tablet (ODT) (SERVONEX)	tablet	100	65.00	6,500.00
542	Enalapril 20 mg as maleate (STALPRIL)	tablet/cap	67	7.75	519.25
543	Escitalopram oxalate 10mg (ESCINAL)	tablet/cap	200	35.00	7,000.00
544	Ferrous sulfate 60mg + Folic Acid 400mcg (FERGLOBIN FA)	tablet/cap	280	3.00	840.00
545	Ferrous sulfate 60mg > 325mg elemental iron (FERRICORE)	tablet/cap	140	3.00	420.00
546	Fluconazole 50mg (MYCOZOLE)	tablet/cap	140	160.00	22,400.00
547	Fluconazole 200mg (DIFLUCAN)	tablet/cap	140	1,000.00	140,000.00
548	Furosemide 20mg (DLI)	tablet/cap	192	3.00	576.00
549	Furosemide 40mg (FUROMED)	tablet/cap	280	5.00	1,400.00
550	Gabapentin 100mg (GABIX)	tablet/cap	50	27.00	1,350.00
551	Gliclazide 80mg (GLICAMED)	tablet/cap	140	4.00	560.00
552	Hyoscine N Butyl Bromide 10mg (HIOSPAN)	tablet/cap	140	10.00	1,400.00
553	Ipratropium + Salbutamol (for nebulization) 500 micrograms ipratropium (as bromide anhydrous) + 2.5 mg salbutamol (as base) x 2.5 mL (unit dose) (HIVENT PLUS)	nebule	140	27.00	3,780.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : no - 2023 - 05 - 03927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:GONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
554	Irbesartan 150mg (VIRBEZ)	tablet.	140	20.00	2,800.00
555	Isosorbide Mononitrate 30mg MR (ISMODIN)	tablet	140	11.75	1,645.00
556	Isosorbide Dinitrate 5mg (sublingual) (SORBANCE)	tablet	129	20.00	2,580.00
557	Lactulose 3.3 g/5 mL (66%) syrup, 120 mL (LAXAC)	bottle.	280	280.00	78,400.00
558	Lansoprazole 30 mg (LANVELL)	tablet/cap	280	50.00	14,000.00
559	Levofloxacin 500mg (TEVOLOX)	tablet/cap	190	45.00	8,550.00
560	Levothyroxine Na 50mcg (THYDIN)	tablet.	140	7.00	980.00
561	Loratadine 10mg / film coated (LORASAPH)	tablet.	140	9.00	1,260.00
562	Losartan 50mg (as potassium salt) (VIVASARTAN)	tablet/cap	10,000	7.00	70,000.00
563	Mefenamic acid 500mg (MECID)	tablet/cap	140	5.00	700.00
564	Metformin (as hydrochloride) 500mg/film coated (GLYFORMET)	tablet/cap	280	4.75	1,330.00
565	Methimazole (thiamazole) 5 mg (TAPDIN)	tablet/cap	100	6.75	675.00
566	Metronidazole 125 mg/5 mL, 60 mL suspension (MEDGYL)	bottle.	140	50.00	7,000.00
567	Metoprolol (as tartrate) 50mg (PROMETIN)	tablet/cap	680	3.00	2,040.00
568	Metoprolol (as tartrate) 100mg (PROMETIN)	tablet/cap	140	5.00	700.00
569	Montelukast (as sodium salt) 10mg (LEUKOREX)	tablet/cap	140	20.00	2,800.00
570	Multivitamins Adult Vit A: 600-700mcg or 2,000-2,500 IU, Vit B1: 1.3-1.7mg, Vit B2: 0.7-3mg, Vit B6: 1.6-2mg, Vit B12: 2-6mcg, Vit C: 65-80mg, Vit D: 400 IU (10 mcg) (MULTIGEN)	tablet/cap	280	5.00	1,400.00
571	Mupirocin Ointment 2%, 5g (BACTRIGON)	tube	140	200.00	28,000.00
572	Nifedipine 30mg MR (ADALAT GITS-30)	tablet/cap	140	44.40	6,216.00
573	Omeprazole 20mg (OOMEPHIL-20)	tablet/cap	1,542	25.00	38,550.00
574	Omeprazole 40mg (RANZOLE)	tablet/cap	2,000	35.00	70,000.00
575	Paracetamol 500mg (ANASERAN)	tablet/cap	280	3.25	910.00
576	Potassium Chloride 750 mg durules equiv. to approximately 10 mEq potassium (KALIGEN)	tablet/cap	140	24.75	3,465.00
577	Potassium (as citrate) 10 mEq. (KAITRATE)	tablet/cap	140	5.00	700.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : No. 2023. 05-3497

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
578	Povidone Iodine 1% oral antiseptic 60ml (ALFA GARGLE)	bottle	140	89.00	12,460.00
579	Prednisone 5mg (ORAPRED)	tablet/cap	140	2.40	336.00
580	Prednisone 10mg (PRESONE)	tablet/cap	140	5.75	805.00
581	Quetiapine (as Fumarate) 25mg (QTIPINE 25)	tablet/cap	140	30.00	4,200.00
582	Quetiapine (as Fumarate) 100mg (QUETIAPRO)	tablet/cap	140	59.00	8,260.00
583	Risperidone 2mg orodispersible tabletlet (RISGEN)	tablet/cap	140	32.00	4,480.00
584	Rosuvastatin (as calcium salt) 10mg (AURORA)	tablet/cap	280	12.00	3,360.00
585	Rosuvastatin (as calcium salt) 20mg (AURORA)	tablet/cap	10,000	16.00	160,000.00
586	Salbutamol (as sulfate) Solution for nebulization 1mg/ml, 2.5ml (unit dose) (HIVENT)	nebule	140	18.00	2,520.00
587	Salbutamol (as sulfate) Solution for nebulization 2mg/ml, 2.5ml (unit dose) (HIVENT DS)	nebule	140	20.00	2,800.00
588	Simvastatin 40mg (ZIMVAST)	tablet/cap	97	20.00	1,940.00
589	Tamsulosin Hydrochloride 200mcg, orally disintegrating tablet. (URILAX)	tablet/cap	140	25.00	3,500.00
590	Tramadol Hydrochloride 50mg (GESITRAM)	tablet/cap	140	10.00	1,400.00
591	Tranexamic acid 500mg (DLI)	tablet/cap	140	10.00	1,400.00
592	Valsartan 80mg film coated (VALAZYD 80)	tablet/cap	140	23.50	3,290.00
593	Vitamin B1 100mg, B6 5mg, B12 50mcg (B-complex) (RAPID-B100)	tablet/cap	140	8.00	1,120.00
594	Adenosine 3 mg/ml, 2ml (IV) (ADESAN)	amp/vl	50	1,100.00	55,000.00
595	Amikacin Sulfate 250mg/ml, 2ml (IM/IV) (CINMIK)	amp/vl	50	90.00	4,500.00
596	Amiodarone Hydrochloride 50mg/ml, 3ml (IV) (EURYTHMIC)	amp	50	321.25	16,062.50
597	Anti-tetanus Serum (equine) 1500iu/ml, 1ml (IM) (ANTITET)	amp.	50	142.00	7,100.00
598	Azithromycin 500mg powder (as base/as dihydrate) (IV infusion) (AZEEMYCIN)	vial	49	612.75	30,024.75
599	Biphasic Isophane Human 70/30 (recombinant DNA) 100 IU/mL, 5mL (SC) (WOSULIN 70/30)	vial	100	500.00	50,000.00
600	Biphasic Isophane Human Insulin 70/30 (recombinant DNA) 100 IU/mL, 10mL (SC) (WOSULIN 70/30)	vial	100	500.00	50,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : NV Quan. 05-3427

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL **Delivery Schedule :** Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
601	Calcium Gluconate 10%, 10 mL (IV) (EUROMED)	amp/vl	100	60.00	6,000.00
602	Cefepime Hydrochloride 1g (IM, IV) (CEFEVEX)	amp/vl	50	950.00	47,500.00
603	Ceftriaxone Sodium 1gm + 10ml diluent (IV) (KEPTRIX)	amp/vl	35	350.00	12,250.00
604	Cefuroxime Sodium 750mg (IM, IV) (NEOCEFUXIME)	amp/vl	100	200.00	20,000.00
605	Ciprofloxacin 400mg/200mL (IV infusion) or 2mg/ml, 200ml (CIPRONAT)	amp/vl	100	450.00	45,000.00
606	Clindamycin Phosphate 150mg/ml, 4ml (IM, IV) (CLINDARENE)	amp/vl	100	300.00	30,000.00
607	Dextrose 50% solution for injection 50ml (EUROMED)	amp/vl	100	65.00	6,500.00
608	Digoxin 250mcg/ml, 2ml (IM, IV) (CARDIOXIN)	amp/vl	70	230.00	16,100.00
609	Dobutamine Hydrochloride 50mg/ml, 5ml (concentrate) (IV infusion) (DOBUKON)	amp.	60	300.00	18,000.00
610	Dopamine Hydrochloride 40mg/ml, 5ml (IV) (DOPINE)	amp.	50	140.00	7,000.00
611	Dopamine Hydrochloride 800 mcg/ml, 250ml D5W (pre-mixed) (IV) (MYOCARD-DX)	amp.	50	699.00	34,950.00
612	Enoxaparin Sodium 100mg/ml, 0.4ml pre-filled syringe (SC) (LOMOH-40)	p-syr.	50	500.00	25,000.00
613	Epinephrine (adrenaline) Hydrochloride 1mg/ml, 1ml (IM, SC) (GRAND PHARMA)	amp.	100	80.00	8,000.00
614	Ertapenem Sodium 1g powder, vial (IM/IV) (INVANZ)	vial	100	3,500.00	350,000.00
615	Furosemide 10mg/ml, 2ml (IM, IV) (FUROSAN)	amp/vl	81	25.00	2,025.00
616	Heparin (unfractionated) sodium 5000iu/ml, 5ml (IV infusion, SC) (APRINOL)	amp/vl	64	300.00	19,200.00
617	Human Albumin 25% IV infusion Solution 50ml (PLASBUMIN-25)	bottle	100	4,500.00	450,000.00
618	Hydrocortisone Sodium Succinate 250mg (IV) (GORTIZONE)	amp/vl	100	180.00	18,000.00
619	Hyoscine N Butyl Bromide 20mg/ml, 1ml (IM, IV, SC) (SPASBASCINE)	amp/vl	50	60.00	3,000.00
620	Levofloxacin 5 mg/mL solution for IV infusion, 100 ml (LOXEVA)	amp/vl	100	850.00	85,000.00
621	Magnesium Sulfate (as heptahydrate) 250mg/ml, 20ml (IV) (EUROMED)	amp/vl	50	60.00	3,000.00
622	Meropenem trihydrate 1g powder (IV) (MEROMAX)	amp/vl	100	850.00	85,000.00
623	Meropenem trihydrate 500mg powder (IV) (MEROMAX)	amp/vl	100	550.00	55,000.00
624	Metoclopramide Hydrochloride 5mg/ml, 2ml (IM, IV) (METOCLOSIL)	amp/vl	100	30.00	3,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

OBR : No. 0121 dt. 3427

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	; 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	;006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL **Delivery Schedule :** Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
625	Metronidazole 5mg/ml, 100ml (IV infusion) (EUROMET)	bottle.	50	60.00	3,000.00
626	Nicardipine Hydrochloride 1mg/ml, 10ml (IV) (NICAPEDZ)	amp/vl	70	645.75	45,202.50
627	Nitroglycerin (Glyceryl trinitrate) 1 mg/ml, 10 ml (NITROSAN)	amp/vl	70	420.00	29,400.00
628	Norepinephrine bitartrate 1mg/ml, 10 ml (concentrate solution for infusion) (DOPAQURE)	amp/vl	100	1,420.13	142,013.00
629	Norepinephrine bitartrate 1mg/ml, 4 ml (IV infusion) (QUIPRIN)	amp/vl	100	600.00	60,000.00
630	Ondansetron 2 mg/ml, 2ml (IM, IV) (EMISTOP)	amp/vl	30	300.00	9,000.00
631	Paracetamol 150 mg/mL, 2mL ampule solution for injection (IM/IV) (AMCETAM)	amp/vl	150	20.00	3,000.00
632	Piperacillin Sodium 4gm + Tazobactam Sodium 500mg (IV infusion) (VIGOCID)	amp/vl	100	480.00	48,000.00
633	Pneumococcal Polyvalent Vaccine, 25mcg/0.5mL, 0.5ml prefilled syringe or single dose vial (IM, SC) (PNEUMOVAX23)	amp/vl	100	2,200.00	220,000.00
634	Potassium Chloride 2mEq/ml, 20ml (IV Infusion) (EUROMED)	amp/vl.	100	48.75	4,875.00
635	Regular, Insulin (recombinant DNA human) 100 IU/mL, 10 mL (SC, IV/IM) (WOSULIN R)	amp/vl.	100	500.00	50,000.00
636	Sodium Bicarbonate 1mEq/ml, 100ml (adult) (IV infusion) (BBRAUN)	amp/vl.	13	550.00	7,150.00
637	Sodium Bicarbonate 1mEq/ml, 50ml (adult) (IV infusion) (HOSPIRA)	amp/vl.	100	159.75	15,975.00
638	Sodium Chloride 2.5mEq/ml, 20ml (EUROMED)	amp/vl.	40	60.00	2,400.00
639	Sterile Water for Injection 50ml (no preservative) (EUROMED)	bottle/bag	98	50.00	4,900.00
640	Sterile Water for Injection 5ml (EUROMED)	amp/vl.	64	30.00	1,920.00
641	Tetanus toxoid, 0.5 ml (IM) (IMATET)	amp/vl.	100	100.00	10,000.00
642	Tramadol Hydrochloride 50mg/ml, 1ml (IM, IV, SC) (PEPTRAD)	amp/vl.	65	75.00	4,875.00
643	Vancomycin Hydrochloride 1g (IV) (AVANCOMYCIN 1)	amp/vl.	80	550.00	44,000.00
644	Vancomycin Hydrochloride 500mg (IV) (AVANCOMYCIN 500)	amp/vl.	72	450.00	32,400.00
	INTERNAL MEDICINE DEPARTMENT				
645	Lactated Ringer's Solution 1L (EUROMED)	bottle.	1,500	85.00	127,500.00
646	Lactated Ringer's Solution 500ml (EUROMED)	bottle.	1,000	79.00	79,000.00

MA. JOSEPINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

OBR : NO. 2023 05-3107

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL **Delivery Schedule :** Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
647	0.9% NaCl for IV Infusion solution 100 mL (SAHAR)	bottle.	100	65.00	6,500.00
648	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle.	4,500	85.00	382,500.00
649	5% Dextrose in Lactated Ringer's Solution 1L (EUROMED)	bottle.	2,500	85.00	212,500.00
650	5% Dextrose in Lactated Ringer's Solution 500ml (EUROMED)	bottle.	500	79.00	39,500.00
651	5% Dextrose in 0.3% Sodium Chloride 1L (EUROMED)	bottle.	50	85.00	4,250.00
652	5% Dextrose in 0.3% Sodium Chloride 500ml (EUROMED)	bottle.	50	79.00	3,950.00
653	5% Dextrose in 0.9% Sodium Chloride 1L (EUROMED)	bottle.	50	85.00	4,250.00
654	5% Dextrose in 0.9% Sodium Chloride 500ml (EUROMED)	bottle.	250	79.00	19,750.00
655	5% Dextrose in Water 250ml (EUROMED)	bottle.	250	135.00	33,750.00
656	5% Dextrose in Water 500ml (EUROMED)	bottle.	250	79.00	19,750.00
657	5% Dextrose in Water 1L (EUROMED)	bottle.	250	85.00	21,250.00
658	10% Dextrose in Water 500ml (EUROMED)	bottle.	100	79.00	7,900.00
	DANGEROUS DRUGS				
659	Diazepam 5 mg/mL, 2 mL (IM, IV) (VALIUM)	amp/vl	100	105.00	10,500.00
660	Midazolam 5mg/ml, 1ml (IM, IV) (DORMICUM)	amp/vl	10	105.35	1,053.50
661	Midazolam 5mg/ml, 3ml (IM, IV) (DORMICUM)	amp/vl	10	200.00	2,000.00
662	Morphine Sulfate 10mg (HIZON)	tablet/cap	20	55.00	1,100.00
663	Morphine Sulfate 16mg/ml, 1ml (IM, IV) (HIZON)	amp/vl	20	122.25	2,445.00
	ORAL,OPHTHALMIC,NEBULE & PSYCH. PREPARATIONS				
664	Acetylcysteine 600mg effervescent tablet (FLUIMUCIL)	tablet	740	30.00	22,200.00
665	Acetazolamide 250mg tablet (CETAMID)	tablet	250	19.00	4,750.00
666	Aciclovir 800 mg (SYCLOVIR)	tablet/cap	75	70.00	5,250.00
667	Alprazolam 250mcg (ALTROX 250)	tablet/cap	50	21.00	1,050.00
668	Aluminum Hydroxide 225mg + Magnesium Hydroxide 200mg per 5ml suspension, 120 ml (MONNAX)	bottle	20	105.00	2,100.00
669	Amlodipine besilate 10mg (AMBESYL)	tablet/cap	3,000	8.75	26,250.00
670	Amlodipine besilate 5mg (AMBESYL)	tablet/cap	3,000	6.45	19,350.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanna B. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO-2023-05-3927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
671	Amoxicillin Trihydrate 500mg (AMBIMOX)	tablet/cap	44	7.50	330.00
672	Ascorbic Acid 500mg, film-coated (APCEE)	tablet	1,000	2.00	2,000.00
673	Aspirin 80mg (SAPHRIN)	tablet	2,000	1.50	3,000.00
674	Azithromycin 500mg (as monohydrate) (AZITHVA)	tablet/cap	1,000	40.00	40,000.00
675	Betahistine hydrochloride 24mg (VERT)	tablet/cap	75	40.00	3,000.00
676	Betamethasone Cream 0.1%, 5g tube (as valerate) (BETNOVATE)	tube	20	343.50	6,870.00
677	Bisacodyl 10 mg (adult) suppository (VESILAC)	supp	100	25.00	2,500.00
678	Budesonide 160mcg + Formoterol 4.5mcg (as fumarate dihydrate) x 60 doses with dispenser (DPI) (SYMBICORT)	bottle.	150	1,473.00	220,950.00
679	Budesonide 250mcg/ml, 2ml (unit dose) for nebulization (BREECORT)	nebule	250	80.75	20,187.50
680	Butamirate Citrate 50mg MR (COFMED)	tablet.	250	15.00	3,750.00
681	Calcium Carbonate 500mg (elemental calcium) chewable (CALSAN)	tablet	500	15.00	7,500.00
682	Captopril 25mg (HYPERSTOP)	tablet/cap	375	5.50	2,062.50
683	Carvedilol 12.5mg (KARVIL)	tablet/cap	2,000	10.50	21,000.00
684	Carvedilol 6.25mg (DILABLOC)	tablet/cap	2,000	7.25	14,500.00
685	Cefixime 200mg (FLAMIFIX)	tablet/cap	1,000	65.00	65,000.00
686	Cefuroxime axetil 500mg (AEROX)	tablet/cap	373	15.00	5,595.00
687	Celecoxib 200mg (EMICOX)	tablet/cap	500	7.75	3,875.00
688	Cetirizine dihydrochloride 10mg (SAPHZINE)	tablet/cap	500	6.00	3,000.00
689	Chlorhexidine Gluconate 0.12% and 4%, 120 mL (ORAHEX)	bottle.	200	164.00	32,800.00
690	Cilostazole 100mg (PENCIL 100)	tablet	350	24.00	8,400.00
691	Clopidogrel 75mg (CLOPIVAZ)	cap	784	20.00	15,680.00
692	Ciprofloxacin hydrochloride 500mg (CYFROX)	tablet/cap	200	15.00	3,000.00
693	Clarithromycin 500mg (KLARITHIX)	tablet/cap	100	40.00	4,000.00
694	Clindamycin Hydrochloride 300mg (ACRESIL)	tablet/cap	700	10.00	7,000.00
695	Clonidine Hydrochloride 75mcg (CLODIN)	cap	500	20.00	10,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

May 23, 2023

Funds Available:

OBR : NN-2024-05-3927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
696	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 500mg amoxicillin (as trihydrate) + 125 mg potassium clavulanate per tabletlet (RANICLAV)	tablet	750	18.50	13,875.00
697	Cotrimoxazole (sulfamethoxazole + trimethoprim) 800 mg sulfamethoxazole + 160mg trimethoprim tabletlet (KATHREX)	tablet	383	3.00	1,149.00
698	Digoxin 50mcg/mL elixir, 60mL (LANOXIN)	bottle.	20	1,100.00	22,000.00
699	Digoxin 250 mcg (INOXIN)	tablet/cap	300	4.25	1,275.00
700	Diphenhydramine Hydrochloride 50mg (HISTAZYN)	tablet/cap	250	3.48	870.00
701	Diphenhydramine Hydrochloride 25 mg (BENADRYL AH)	tablet/cap	250	22.25	5,562.50
702	Domperidone 10mg (TORIDON)	tablet/cap	150	16.50	2,475.00
703	Donepezil 5 mg/orodispersible tablet (ODT) (SERVONEX 5)	tablet	20	50.00	1,000.00
704	Donepezil 10 mg/orodispersible tablet (ODT) (SERVONEX 10)	tablet	20	65.00	1,300.00
705	Doxycycline 100mg (as hyclate) (DOTHIX)	tablet/cap	300	10.00	3,000.00
706	Enalapril 5 mg as maleate (NAPRILATE)	tablet/cap	443	6.66	2,950.38
707	Enalapril 20 mg as maleate (HYPACE)	tablet/cap	674	7.75	5,223.50
708	Esmolol Hydrochloride 100mg/ml, 10ml (ESOBLOC)	amp/vl	100	850.00	85,000.00
709	Ferrous sulfate 60mg + Folic Acid 400mcg (FERGLOBIN FA)	tablet/cap	1,002	3.00	3,006.00
710	Fluconazole 200mg (DIFLUCAN)	tablet/cap	200	1,000.00	200,000.00
711	Fluticasone (as propionate) + Salmeterol (as xinafoate) 50 micrograms fluticasone + 25 micrograms salmeterol x 120 actuations (with dose counter*) (SERETIDE)	bottle.	10	560.00	5,600.00
712	Fluticasone (as propionate) + Salmeterol (as xinafoate) 250 micrograms fluticasone + 25 micrograms salmeterol x 120 actuations (with dose counter*) (FORAIR)	bottle	15	498.00	7,470.00
713	Fluticasone (as propionate) + Salmeterol (as xinafoate) 250 micrograms fluticasone + 50 micrograms salmeterol x 60 doses with dispenser DPI (SALMEFLO DPI)	bottle	10	520.00	5,200.00
714	Furosemide 20mg (DLI)	tablet/cap	137	3.00	411.00
715	Furosemide 40mg (FUROMED)	tablet/cap	2,000	5.00	10,000.00
716	Gabapentin 100mg (GABIX)	tablet/cap	50	27.00	1,350.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO. 2023 05-3927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
717	Gliclazide 80mg (GLICAMED)	tablet/cap	750	4.00	3,000.00
718	Hyoscine N Butyl Bromide 10mg (HIOSPAN)	tablet/cap	20	10.00	200.00
719	Ipratropium + Salbutamol (for nebulization) 500 micrograms ipratropium (as bromide anhydrous) + 2.5 mg salbutamol (as base) x 2.5 mL (unit dose) (HIVENT PLUS)	nebule	200	27.00	5,400.00
720	Ipratropium (as bromide) (for nebulization) 250 micrograms/mL, 2 mL (unit dose) (ATROVENT)	nebule	250	135.75	33,937.50
721	Irbesartan 300mg (VIRBEZ)	tablet/cap	2,000	22.00	44,000.00
722	Irbesartan 150mg (VIRBEZ)	tablet/cap	2,000	20.00	40,000.00
723	Isosorbide Mononitrate 30mg MR (ISMODIN)	tablet/cap	1,000	11.75	11,750.00
724	Isosorbide Dinitrate 5mg (sublingual) (SORBANCE)	tablet/cap	923	20.00	18,460.00
725	Lactulose 3.3 g/5 mL (66%) syrup, 120 mL (LAXAC)	bottle.	300	280.00	84,000.00
726	Levofloxacin 500mg (TEVOLOX)	tablet/cap	68	45.00	3,060.00
727	Levothyroxine Na 50mcg (THYDIN)	tablet/cap	1,000	7.00	7,000.00
728	Levothyroxine Na 100mcg (THYDIN)	tablet/cap	1,000	12.00	12,000.00
729	Loratadine 10mg / film coated (LORASAPH)	tablet/cap	500	9.00	4,500.00
730	Losartan 50mg (as potassium salt) (VIVASARTAN)	tablet/cap	1,000	7.00	7,000.00
731	Losartan 100mg (as potassium salt) (VIVASARTAN)	tablet/cap	1,500	8.00	12,000.00
732	Mebendazole 500mg tablet/chewable (KHRIZVER)	tablet	50	6.00	300.00
733	Mefenamic acid 500mg (MECID)	tablet/cap	200	5.00	1,000.00
734	Metformin (as hydrochloride) 500mg/film coated (GLYFORMET)	tablet/cap	1,000	4.75	4,750.00
735	Methimazole (thiamazole) 5 mg (TAPDIN)	tablet/cap	400	6.75	2,700.00
736	Methotrexate 2.5 mg (as base) (METOREX)	tablet/cap	200	10.00	2,000.00
737	Metronidazole 500mg (MEDGYL)	tablet/cap	100	5.00	500.00
738	Metronidazole 125 mg/5 mL, 60 mL suspension (MEDGYL)	bottle	10	50.00	500.00
739	Metoprolol (as tartrate) 50mg (PROMETIN)	tablet/cap	1,360	3.00	4,080.00
740	Montelukast (as sodium salt) 10mg (LEUKOREX)	tablet/cap	200	20.00	4,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 25, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO. 2023 05- 3922

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order

Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
741	Multivitamins Adult Vit A: 600-700mcg or 2,000-2,500 IU, Vit B1: 1.3-1.7mg, Vit B2: 0.7-3mg, Vit B6: 1.6-2mg, Vit B12: 2-6mcg, Vit C: 65-80mg, Vit D: 400 IU (10 mcg) (MULTIGEN)	tablet/cap	1,500	5.00	7,500.00
742	Mupirocin Ointment 2%, 5g (BACTRIGON)	tube	100	200.00	20,000.00
743	Naproxen Sodium 550mg (FLANAX FORTE)	tablet/cap	20	30.00	600.00
744	Nifedipine 30mg MR (ADALAT GITS 30)	tablet/cap	200	44.40	8,880.00
745	Nifedipine 10mg (NICARDIA)	tablet/cap	300	4.00	1,200.00
746	Nimodipine 30mg (NIMOTOP)	tablet/cap	26	44.70	1,162.20
747	Omeprazole 40mg (RANZOLE)	tablet/cap	1,500	35.00	52,500.00
748	Oxymetazoline (as hydrochloride) 0.05%, 15ml Nasal Spray (DRIXINE)	bottle	10	342.00	3,420.00
749	Paracetamol 500mg (ANASERAN)	tablet/cap	5,000	3.25	16,250.00
750	Potassium Chloride 750 mg durules equiv. to approximately 10 mEq potassium (KALIGEN)	tablet/cap	1,000	24.75	24,750.00
751	Povidone Iodine 1% oral antiseptic 60ml (ALFA GARGLE)	bottle	20	89.00	1,780.00
752	Prednisone 10mg (PRESONE)	tablet/cap	500	5.75	2,875.00
753	Prednisone 20mg (PROLIX)	tablet/cap	500	7.75	3,875.00
754	Rifaximin 200mg (NORMIX)	tablet.	200	110.00	22,000.00
755	Rosuvastatin (as calcium salt) 10mg (AURORA)	tablet/cap	1,000	12.00	12,000.00
756	Rosuvastatin (as calcium salt) 20mg (AURORA)	tablet/cap	1,000	16.00	16,000.00
757	Sacubitril/Valsartan 50 mg (ENTRESTO)	tablet	200	175.00	35,000.00
758	Sacubitril/Valsartan 100 mg Tabletlet (ENTRESTO)	tablet	300	175.00	52,500.00
759	Salbutamol (as sulfate) Solution for nebulization 1mg/ml, 2.5ml (unit dose) (HIVENT)	nebule	400	18.00	7,200.00
760	Salbutamol (as sulfate) Solution for nebulization 2mg/ml, 2.5ml (unit dose) (HIVENT DS)	nebule	800	20.00	16,000.00
761	Salbutamol 100 mcg/dose x 200 doses Metered Dose Inhaler (DERIHALER 100)	bottle.	100	260.00	26,000.00
762	Tamsulosin Hydrochloride 200mcg, orally disintegrating tablet. (URILAX)	tablet	300	25.00	7,500.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : NO. 2023-05-3927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
763	Telmisartan 40mg (MISTACOR)	tablet.	600	23.00	13,800.00
764	Telmisartan 80mg (MISTACOR)	tablet.	200	34.00	6,800.00
765	Tolvaptan 15mg (SAMSCA)	tablet/cap	150	816.00	122,400.00
766	Tramadol Hydrochloride 50mg (GESITRAM)	tablet/cap	300	10.00	3,000.00
767	Tranexamic acid 500mg (DLI)	tablet/cap	300	10.00	3,000.00
768	Valsartan 80mg film coated (VALAZYD 80)	tablet/cap	300	23.50	7,050.00
769	Vitamin B1 100mg, B6 5mg, B12 50mcg (B-complex) (RAPID-B100)	tablet/cap	500	8.00	4,000.00
770	Adenosine 3 mg/ml, 2ml (IV) (ADESAN)	amp/vl	200	1,100.00	220,000.00
771	Amikacin Sulfate 250mg/ml, 2ml (IM/IV) (CINMIK)	amp/vl	200	90.00	18,000.00
772	Amiodarone Hydrochloride 50mg/ml, 3ml (IV) (EURYTHMIC)	amp/vl	200	321.25	64,250.00
773	Amino Acids, Crystalline Standard 3.5%, 500ml bottle (IV infusion) (AMINOGEN-S)	bottle.	25	1,200.00	30,000.00
774	Amphotericin B (Non-Lipid Complex) 50mg lyophilized powder (IV infusion) (AMPHOTRET)	amp/vl	8	11,909.53	95,276.24
775	Ampicillin Sodium 1000mg + Sulbactam Sodium 500mg(IM/IV) (AMSULVEX)	amp/vl	65	750.00	48,750.00
776	Azithromycin 500mg powder (as base/as dihydrate) (IV infusion) (AZEEMYCIN)	amp/vl	492	612.75	301,473.00
777	Biphasic Isophane Human 70/30 (recombinant DNA) 100 IU/mL, 5mL (SC) (WOSULIN 70/30)	vial	300	500.00	150,000.00
778	Biphasic Isophane Human Insulin 70/30 (recombinant DNA) 100 IU/mL, 10mL (SC) (WOSULIN 70/30)	amp/vl	300	500.00	150,000.00
779	Biphasic Isophane Human Insulin 70/30 (recombinant DNA) 100 IU/mL, 3mL glass cartridge (SC) (SCILIN M30 70/30 KWIKPEN)	cart.	100	761.00	76,100.00
780	Calcium Gluconate 10%, 10 mL (IV) (EUROMED)	amp/vl	300	60.00	18,000.00
781	Cefazolin Sodium 1gm (IM/IV) (FAZLIN)	amp/vl	10	200.00	2,000.00
782	Cefepime Hydrochloride 1g (IM, IV) (CEFEVEX)	amp/vl	200	950.00	190,000.00
783	Ceftaxidime pentahydrate 1g (IM, IV) (CEFTEBAS)	amp/vl	200	300.00	60,000.00
784	Ceftriaxone Sodium 1gm + 10ml diluent (IV) (KEPTRIX)	amp/vl	321	350.00	112,350.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

OBR : NOV. 2022 05- 03927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL **Delivery Schedule :** Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
785	Cefuroxime Sodium 750mg (IM, IV) (NEOCEFUXIME)	amp/vl	200	200.00	40,000.00
786	Ciprofloxacin 400mg/200mL (IV infusion) or 2mg/ml, 200ml (CIPRONAT)	amp/vl	200	450.00	90,000.00
787	Cisplatin 1mg/ml, 10ml (IV) (CISTEEN)	amp/vl	100	393.65	39,365.00
788	Cisplatin 1mg/ml, 50ml (IV) (CISTEEN)	amp/vl	75	1,000.00	75,000.00
789	Clindamycin Phosphate 150mg/ml, 4ml (IM, IV) (CLINDARENE)	amp/vl	500	300.00	150,000.00
790	Colistin 2,000,000 IU lyophilized powder for injection (IV) (COLISAN-2)	vial	15	2,595.00	38,925.00
791	Dexamethasone 4 mg/mL, 2 mL ampul/vial (IM, IV) (as sodium phosphate) (DEXAMAX)	amp/vl	475	50.00	23,750.00
792	Dextrose 50% solution for injection 50ml (EUROMED)	amp/vl	600	80.00	48,000.00
793	Digoxin 250mcg/ml, 2ml (IM, IV) (CARDIOXIN)	amp.	200	230.00	46,000.00
794	Diphenhydramine Hydrochloride 50mg/ml, 1ml (IM, IV) (ALLERIGHT)	amp/vl	200	50.00	10,000.00
795	Dobutamine Hydrochloride 50mg/ml, 5ml (concentrate) (IV infusion) (DOBUKON)	amp/vl	300	300.00	90,000.00
796	Dopamine Hydrochloride 40mg/ml, 5ml (IV) (DOPINE)	amp/vl	150	140.00	21,000.00
797	Dopamine Hydrochloride 800 mcg/ml, 250ml D5W (pre-mixed) (IV) (MYOCARD-DX)	amp/vl	300	699.00	209,700.00
798	Enoxaparin Sodium 100mg/ml, 0.4ml pre-filled syringe (SC) (LOMOH-40)	p-syr.	1,000	500.00	500,000.00
799	Enoxaparin Sodium 100mg/ml, 0.6ml pre-filled syringe (SC) (LOMOH-60)	p-syr.	950	675.00	641,250.00
800	Epinephrine (adrenaline) Hydrochloride 1mg/ml, 1ml (IM, SC) (GRAND PHARMA)	amp/vl	2,500	80.00	200,000.00
801	Ertapenem Sodium 1g powder, vial (IM/IV) (INVANZ)	vial	50	3,500.00	175,000.00
802	Furosemide 10mg/ml, 2ml (IM, IV) (FUROSAN)	amp/vl	812	25.00	20,300.00
803	Gentamicin Sulfate 40mg/ml, 2ml (IM, IV) (GENTACARE)	amp/vl	10	30.00	300.00
804	Heparin (unfractionated) sodium 1000iu/ml, 5ml (IV infusion, SC) (bovine origin) (APRINOL 5000)	amp/vl	92	120.00	11,040.00
805	Heparin (unfractionated) sodium 5000iu/ml, 5ml (IV infusion, SC) (bovine origin) (APRINOL 25000)	amp/vl	64	300.00	19,200.00
806	Human Albumin 20% IV infusion Solution 50ml (ALBUMAX)	bottle	150	4,200.00	630,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : No. 2023-05-3927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
807	Human Albumin 25% IV infusion Solution 50ml (PLASBUMIN-25)	bottle	150	4,500.00	675,000.00
808	Hepatitis B Immunoglobulin (human) 0.5ml (IM) (HEPABIG)	amp/vl	10	2,250.00	22,500.00
809	Hydrocortisone Sodium Succinate 100mg (IV) (CORTEF)	amp/vl	100	120.00	12,000.00
810	Hydrocortisone Sodium Succinate 250mg (IV) (GORTIZONE)	amp/vl	300	180.00	54,000.00
811	Hyoscine N Butyl Bromide 20mg/ml, 1ml (IM, IV, SC) (SPASBASCINE)	amp/vl	20	60.00	1,200.00
812	Isophane Insulin Human (recombinant DNA) 100 IU/mL, 10 mL (SC) (WOSULIN N)	amp/vl	30	500.00	15,000.00
813	Isosorbide Dinitrate 1mg/ml, 10ml (IV) (ISOKET)	amp/vl	80	653.25	52,260.00
814	Insulin Glargine 100 units /1ml 2500 unit pen (GLYSOLIN G)	pen	200	695.00	139,000.00
815	Ketorolac tromethamol 30mg/ml, 1ml (IM, IV) (ANALAC)	amp/vl	100	120.00	12,000.00
816	Levofloxacin 5 mg/mL solution for IV infusion, 100 ml (LOXEVA)	amp/vl	400	850.00	340,000.00
817	Magnesium Sulfate (as heptahydrate) 250mg/ml, 20ml (IV) (EUROMED)	amp/vl	300	60.00	18,000.00
818	Meropenem trihydrate 1g powder (IV) (MEROMAX)	amp/vl	500	850.00	425,000.00
819	Meropenem trihydrate 500mg powder (IV) (MEROMAX)	amp/vl	200	550.00	110,000.00
820	Methotrexate 25mg/ml, 2ml (IM, IV) (EMTHEX)	amp/vl	10	420.00	4,200.00
821	Methylprednisolone sodium succinate powder, 125 mg/mL, 2mL vial + diluent vial (IM, IV, IV infusion) (SOLUMEDROL AOV)	amp/vl	50	2,107.05	105,352.50
822	Methylprednisolone sodium succinate powder 1g /16ml + diluent vial (IM, IV, IV infusion) (SOLUMEDROL)	amp/vl	10	8,496.06	84,960.60
823	Metoclopramide Hydrochloride 5mg/ml, 2ml (IM, IV) (METOCLOSIL)	amp/vl	750	30.00	22,500.00
824	Metronidazole 5mg/ml, 100ml (IV infusion) (EUROMET)	bottle.	200	60.00	12,000.00
825	Nicardipine Hydrochloride 1mg/ml, 10ml (IV) (NICAPEDZ)	amp/vl	1,000	645.75	645,750.00
826	Norepinephrine bitartrate 1mg/ml, 4 ml (IV infusion) (QUPRIN)	amp/vl	500	600.00	300,000.00
827	Norepinephrine bitartrate 2mg/ml, 4 ml (IV infusion) (MEPHRIN)	amp/vl	248	1,275.00	316,200.00
828	Omeprazole powder 40mg + 10ml solvent (IV) (RANZOLE)	amp/vl	1,500	250.00	375,000.00
829	Ondansetron 2 mg/ml, 2ml (IM, IV) (EMISTOP)	amp/vl	10	300.00	3,000.00
830	Paclitaxel 6 mg/ml, 16.7ml (IV, IV Infusion) (GENTAXEL)	amp/vl	5	4,500.00	22,500.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanna D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NV-2023-05-3927

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
831	Paracetamol 150 mg/mL, 2mL ampule solution for injection (IM/IV) (AMCETAM)	amp/vl	2,000	20.00	40,000.00
832	Penicillin G Crystalline (benyzylpenicillin sodium) 1,000,000 units (IM/IV) (CATHAY)	amp/vl	446	27.68	12,345.28
833	Penicillin G Benzathine (benzathine benzylpenicillin)1,200,000 units vial (MR) (IM) (ZALPEN)	amp/vl	133	250.00	33,250.00
834	Penicillin G Crystalline (benyzylpenicillin sodium) 5,000,000 units (IM/IV) (LAKESIDE)	amp/vl	500	30.00	15,000.00
835	Phytomenadione 10 mg/mL, 1 mL (IM, IV, SC) (as mixed micelle) (PHYTOMEN)	amp/vl.	500	40.00	20,000.00
836	Piperacillin Sodium 2gm + Tazobactam Sodium 250mg (IV infusion) (VIGOCID)	amp/vl.	1,000	350.00	350,000.00
837	Piperacillin Sodium 4gm + Tazobactam Sodium 500mg (IV infusion) (VIGOCID)	amp/vl.	1,500	480.00	720,000.00
838	Polymyxin B (as sulfate) 500,000 units powder for solution for injection (intrathecal/IM/IV), 5ml vial (POLY-MXB)	vial	50	3,725.25	186,262.50
839	Potassium Chloride 2mEq/ml, 20ml (IV Infusion) (EUROMED)	amp/vl	1,000	48.75	48,750.00
840	Regular, Insulin (recombinant DNA human) 100 IU/mL, 10 mL (SC, IV/IM) (WOSULIN R)	amp/vl	300	500.00	150,000.00
841	Sodium Bicarbonate 1mEq/ml, 50ml (adult) (IV infusion) (HOSPIRA)	amp/vl.	800	159.75	127,800.00
842	Sodium Chloride 2.5mEq/ml, 20ml (EUROMED)	amp/vl	50	60.00	3,000.00
843	Sterile Water for Injection 50ml (no preservative) (EUROMED)	bag	300	50.00	15,000.00
844	Sterile Water for Injection 5ml (EUROMED)	amp/vl	586	30.00	17,580.00
845	Streptokinase 1,500,000 units/vial (THROMBOFLUX)	vial	100	6,300.00	630,000.00
846	Terbutalline (as sulfate) 500mcg/ml, 1ml (IM, IV, SC) (BRICALIN)	amp.	200	140.00	28,000.00
847	Tramadol Hydrochloride 50mg/ml, 1ml (IM, IV, SC) (PEPTRAD)	amp/vl	200	75.00	15,000.00
848	Tramadol Hydrochloride 50mg/ml, 2ml (IM, IV, SC) (AMBIDOL)	amp/vl	200	50.00	10,000.00
849	Tranexamic Acid 100mg/ml, 5ml (IM, IV) (ANCLOTIC)	amp/vl	300	100.00	30,000.00
850	Valproic Acid 500mg/ml IV Infusion, 5 ml (DEPACON)	amp/vl	20	3,541.00	70,820.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : No. 2023-05-3927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
851	Vancomycin Hydrochloride 1g (IV) (AVANCOMYCIN 1)	amp/vl	500	550.00	275,000.00
852	Vancomycin Hydrochloride 500mg (IV) (AVANCOMYCIN 500)	amp/vl	200	450.00	90,000.00
853	Verapamil Hydrochloride 2.5mg/ml, 2ml (IV) (ISOPTIN)	amp/vl	150	150.00	22,500.00
854	Vitamin B1 100mg + B6 100mg + B12 1mg per 3ml (IV) (SANNOVIT)	amp/vl	300	140.00	42,000.00
855	Hydroxychloroquine (as sulfate) 200mg (PLAQUENIL)	tablet	300	115.00	34,500.00
856	Cychlophospamide500mg/vial (CYPHOS-500)	vial	300	300.00	90,000.00
	NUTRITIONAL SUPPORT				
857	Original nutrition powder 9 gram protein, 250 calories, 25 vitamins and minerals 400g (ENSURE) (ENSURE GOLD)	pcs	80	986.00	78,880.00
858	Food supplement powder, percentage kcal protein 100% (mOsm/kg water) 44 sodium (meq): 1 ,400g (BENEPROTEIN)	pcs	80	1,093.26	87,460.80
859	Adut nutritional powdered milk drink 800grams (NUTRIBEST)	pcs	80	1,800.00	144,000.00
860	Adult nutritional powdered milk drink for dietary management of diabetes, 400grams (GLUCERNA)	pcs	80	1,115.74	89,259.20
	DEPARTMENT OF OBSTETRICS & GYNECOLOGY				
861	Hydroxyethyl Starch 6% 500ml (SANBE HEST 200)	bottle.	100	900.00	90,000.00
862	Modified Fluid Gelatin 4% 500ml solution (GELOFUSINE)	bottle.	80	1,150.00	92,000.00
863	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle.	4,000	85.00	340,000.00
864	0.9% NaCl for Irrigation solution 1L (EUROMED)	bottle.	2,000	85.00	170,000.00
865	0.9% NaCl for IV Infusion solution 500ml (EUROMED)	bottle.	500	79.00	39,500.00
866	5% Dextrose in Lactated Ringer's Solution 1L (EUROMED)	bottle.	4,000	85.00	340,000.00
867	5% Dextrose in Water 500ml (EUROMED)	bottle.	1,000	79.00	79,000.00
	DANGEROUS DRUGS				
868	Diazepam 5 mg/mL, 2 mL (IM, IV) (VALIUM)	amp/vl	32	105.00	3,360.00
	ANESTHETICS DRUGS				
869	Lidocaine Hydrochloride 2% Local anesthesia 50ml (EUROMED)	amp/vl	100	90.00	9,000.00
	ORAL,OPHTHALMIC,NEBULE & PSYCH. PREPARATIONS				

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp
Signature Over Printed Name of Supplier / Date MAY 25, 2023

Funds Available:

OBR : NO-2023-05-3924

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
870	Amlodipine besilate 10mg (AMBESYL)	tablet/cap	500	8.75	4,375.00
871	Amoxicillin Trihydrate 500mg (AMBIMOX)	tablet/cap	89	7.50	667.50
872	Ascorbic Acid 500mg, film-coated (APCEE)	tablet.	600	2.00	1,200.00
873	Aspirin 80mg (SAPHRIN)	tablets/cap	200	1.50	300.00
874	Bisacodyl 10 mg (adult) suppository (VESILAC)	supp	150	25.00	3,750.00
875	Budesonide 160mcg + Formoterol 4.5mcg (as fumarate dihydrate) x 60 doses with dispenser (DPI) (SYMBICORT)	bottle	32	1,473.00	47,136.00
876	Budesonide 250mcg/ml, 2ml (unit dose) for nebulization (BREECORT)	nebule	52	80.75	4,199.00
877	Cefalexin monohydrate 500mg (EXEL)	tablet/cap	200	9.50	1,900.00
878	Cefuroxime axetil 500mg (AEROX)	tablet/cap	1,495	15.00	22,425.00
879	Celecoxib 200mg (EMICOX)	tablet/cap	400	7.75	3,100.00
880	Ciprofloxacin hydrochloride 500mg (CYFROX)	tablet/cap	300	15.00	4,500.00
881	Clonidine Hydrochloride 75mcg (CLODIN)	cap	200	20.00	4,000.00
882	Cloxacillin Sodium 500mg (PHILCLOX)	tablet/cap	50	10.00	500.00
883	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 500mg amoxicillin (as trihydrate) + 125 mg potassium clavulanate per tabletlet (RANICLAV)	cap.	300	18.50	5,550.00
884	Cotrimoxazole (sulfamethoxazole + trimethoprim) 800 mg sulfamethoxazole + 160mg trimethoprim tablet (KATHREX)	tab	95	3.00	285.00
885	Diphenhydramine Hydrochloride 50mg (HISTAZYN)	tablet/cap	200	3.48	696.00
886	Doxycycline 100mg (as hyclate) (DOTHIX)	tablet/cap	800	10.00	8,000.00
887	Ferrous sulfate 60mg + Folic Acid 400mcg (FERGLOBIN FA)	tablet/cap	1,500	3.00	4,500.00
888	Ferrous sulfate 60mg > 325mg elemental iron (FERRICORE)	tablet/cap	1,500	3.00	4,500.00
889	Fluticasone (as propionate) + Salmeterol (as xinafoate) 250 micrograms fluticasone + 25 micrograms salmeterol x 120 actuations (FORAIR 250)	bottle.	100	498.00	49,800.00
890	Furosemide 10mg/ml, 2ml (IM, IV) (FUROSAN)	amp/vl	162	25.00	4,050.00
891	Hyoscine N Butyl Bromide 20mg/ml, 1ml (IM, IV, SC) (SPASBASCINE)	amp/vl	200	60.00	12,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

May 23, 2023

Funds Available:

OBR : M. 2023 05 3927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
892	Ipratropium + Salbutamol (for nebulization) 500 micrograms ipratropium (as bromide anhydrous) + 2.5 mg salbutamol (as base) x 2.5 mL (unit dose) (HIVENT PLUS)	nebule	100	27.00	2,700.00
893	Lactulose 3.3 g/5 mL (66%) syrup, 120 mL (LAXAC)	bottle.	100	280.00	28,000.00
894	Mefenamic acid 500mg (MECID)	tablet/cap	1,000	5.00	5,000.00
895	Metformin (as hydrochloride) 500mg/film coated (GLYFORMET)	tablet/cap	200	4.75	950.00
896	Methotrexate 25mg/ml, 2ml (IM, IV) (EMTHEX)	amp/vl	50	420.00	21,000.00
897	Metronidazole 500mg (MEDGYL)	tablet/cap	500	5.00	2,500.00
898	Nifedipine 30mg MR (ADALAT GITS 30)	tablet/cap	500	44.40	22,200.00
899	Nifedipine 10mg (NICARDIA)	tablet/cap	500	4.00	2,000.00
900	Omeprazole powder 40mg + 10ml solvent (IV) (RANZOLE)	amp/vl.	100	250.00	25,000.00
901	Salbutamol (as sulfate) Solution for nebulization 2mg/ml, 2.5ml (unit dose) (HIVENT DS)	nebule	300	20.00	6,000.00
902	Salbutamol 100 mcg/dose x 200 doses Metered Dose Inhaler (DERIHALER)	bottle.	100	260.00	26,000.00
903	Tranexamic acid 500mg (DLI)	tablet/cap	1,000	10.00	10,000.00
904	Tranexamic Acid 100mg/ml, 5ml (IM, IV) (ANCLOTIC)	amp/vl	2,000	100.00	200,000.00
905	Vitamin B1 100mg, B6 5mg, B12 50mcg (B-complex) (RAPID-B100)	tablet/cap	500	8.00	4,000.00
	IM/IV PREPARATIONS				
906	Amino Acids, Crystalline Standard 3.5%, 500ml bottle (IV infusion) (AMINOGEN-S)	bottle.	100	1,200.00	120,000.00
907	Ampicillin Sodium 1000mg + Sulbactam Sodium 500mg (IM/IV) (AMSULVEX)	amp/vl	438	750.00	328,500.00
908	Calcium Gluconate 10%, 10 mL (IV) (EUROMED)	amp/vl	300	60.00	18,000.00
909	Carbetocin 100mcg/mL, 1ml solution for injection (IV) (DURATOCIN)	amp/vl	500	2,166.25	1,083,125.00
910	Carboplatin 10mg/ml, 15ml (IV) (NAPROLAT)	amp/vl	100	1,800.00	180,000.00
911	Carboplatin 10mg/ml, 45ml (IV) (NAPROLAT)	amp/vl	100	4,200.00	420,000.00
912	Carboprost 250 mcg/ml solution for injection, 1ml (ENDOPROST)	amp	100	550.00	55,000.00
913	Cefazolin Sodium 1gm (IM/IV) (FAZLIN)	amp/vl	500	200.00	100,000.00
914	Cefoxitin Sodium 1gm (IM/IV) (MONOWEL)	amp/vl	500	500.00	250,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date
May 23, 2023

Funds Available:

OBR : JU-2023-05-3977

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
915	Ceftriaxone Sodium 1gm + 10ml diluent (IV) (KEPTRIX)	amp/vl	357	350.00	124,950.00
916	Cefuroxime Sodium 750mg (IM, IV) (NEOCEFUXIME)	amp/vl	3,450	200.00	690,000.00
917	Cisplatin 1mg/ml, 10ml (IV) (CISTEEN)	amp/vl	150	393.65	59,047.50
918	Cisplatin 1mg/ml, 50ml (IV) (CISTEEN)	amp/vl	150	1,000.00	150,000.00
919	Clindamycin Phosphate 150mg/ml, 4ml (IM, IV) (CLINDARENE)	amp/vl	100	300.00	30,000.00
920	Progestin Subdermal Implant (PSI) 68mg (IMPLANON NXT)	pack	200	4,132.00	826,400.00
921	Dienogest 2mg/tablet (1x10 tablets)/box (VISANNE)	box	200	2,425.75	485,150.00
922	Megestrol Acetate 160mg/tablet (1x10 tablets)/box (MEGESCEL)	box	10	260.00	2,600.00
923	Medroxyprogesterone Acetate 10mg/tablet (PROVERA)	tablet	300	120.60	36,180.00
924	Medroxyprogesterone 150mg/ml, 1ml suspension for injection (LYNDAVELL)	amp/vl	300	135.75	40,725.00
925	Conjugated Equine Estrogen 0.625mg/tablet (PREMARIN)	tablet	300	43.75	13,125.00
926	Dexamethasone 4 mg/mL, 2 mL ampul/vial (IM, IV) (DEXAMAX)	amp/vl	950	50.00	47,500.00
927	Dextrose 50% solution for injection 50ml (EUROMED)	amp/vl	100	65.00	6,500.00
928	Dobutamine Hydrochloride 50mg/ml, 5ml (concentrate) (IV infusion) (DOBUKON)	amp/vl	50	300.00	15,000.00
929	Dopamine Hydrochloride 40mg/ml, 5ml (IV) (DOPINE)	amp/vl	50	140.00	7,000.00
930	Epinephrine (adrenaline) Hydrochloride 1mg/ml, 1ml (IM, SC) (GRAND PHARMA)	amp/vl	400	80.00	32,000.00
931	Gentamicin Sulfate 40mg/ml, 2ml (IM, IV) (GENTACARE)	amp/vl	42	30.00	1,260.00
932	Human Albumin 25% IV infusion Solution 50ml (PLASBUMIN-25)	bottle	100	4,500.00	450,000.00
933	Hydrocortisone Sodium Succinate 100mg (IV) (CORTEF)	amp	240	120.00	28,800.00
934	Iron Sucrose 20mg/ml, 5ml (FEROSE)	amp	200	490.00	98,000.00
935	Leuproreline Acetate 3.75mg/2ml vial w/ syringe (IM,SC) (LUPRODEX)	vial	50	7,500.00	375,000.00
936	Magnesium Sulfate (as heptahydrate) 250mg/ml, 20ml (IV) (EUROMED)	vial	400	60.00	24,000.00
937	Methylergometrine maleate 200mcg/ml, 1ml (IM, IV) (CETHERGO)	amp/vl	500	75.00	37,500.00
938	Metoclopramide Hydrochloride 5mg/ml, 2ml (IM, IV) (METOCLOSIL)	amp/vl	300	30.00	9,000.00
939	Metronidazole 5mg/5 mL, 100 mL (IV Infusion) (EUROMET)	bottle.	400	60.00	24,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Josephine D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : No. 2023 05-3923

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
940	Nicardipine Hydrochloride 1mg/ml, 10ml (IV) (NICAPEDZ)	amp/vl	300	645.75	193,725.00
941	Ondansetron 2 mg/ml, 2ml (IM, IV) (EMISTOP)	amp/vl	100	300.00	30,000.00
942	Oxytocin (Synthetic) 10 IU/ml, 1ml (IM, IV) (AMBITOCYN)	amp/vl	1,000	120.00	120,000.00
943	Paclitaxel 6 mg/ml, 16.7ml (IV, IV Infusion) (GENTAXEL)	amp/vl	150	4,500.00	675,000.00
944	Paracetamol 150 mg/mL, 2mL ampule solution for injection (IM/IV) (AMCETAM)	amp/vl	1,000	20.00	20,000.00
945	Paracetamol 10mg/ml, 100ml solution for infusion (IV) (THERMODOL IV)	amp/vl	446	429.00	191,334.00
946	Penicillin G Benzathine (benzathine benzylpenicillin) 1,200,000 units vial (MR) (IM) (ZALPEN)	amp/vl	71	250.00	17,750.00
947	Phytomenadione 10 mg/mL, 1 mL (IM, IV, SC) (as mixed micelle) (AMBIVIT)	amp/vl.	20	40.00	800.00
948	Piperacillin Sodium 4gm + Tazobactam Sodium 500mg (IV infusion) (VIGOCID)	amp/vl.	30	480.00	14,400.00
949	Potassium Chloride 2mEq/ml, 20ml (IV Infusion) (EUROMED)	vial	100	48.75	4,875.00
950	Ranitidine Hydrochloride 25mg/ml, 2ml (IM, IV, IV infusion) (RANITEIN)	amp/vl.	100	25.00	2,500.00
951	Regular, Insulin (recombinant DNA human) 100 IU/mL, 10 mL (SC, IV/IM) (WOSULIN R)	amp/vl	50	500.00	25,000.00
952	Terbutalline (as sulfate) 500mcg/ml, 1ml (IM, IV, SC) (BRICALIN)	amp	60	140.00	8,400.00
953	Tetanus Immunoglobulin (human) 250 IU/mL, 1 mL pre-filled syringe (IM) (TETAGAM)	p-syr.	120	1,100.00	132,000.00
954	Tetanus toxoid, 0.5 ml (IM) (IMATET)	amp/vl.	120	100.00	12,000.00
955	Tramadol Hydrochloride 50mg/ml, 1ml (IM, IV, SC) (PEPTRAD)	amp/vl	200	75.00	15,000.00
956	Pneumococcal Polysaccharide Vaccine (PPSV23) 1 dose vial, 0.5ml (PNEUMOVAX23)	vial	50	2,100.00	105,000.00
957	Vitamin B1 100mg + B6 100mg + B12 1mg per 3ml (IV) (NEUROBE)	amp/vl	100	140.00	14,000.00
958	Human Pappilomavirus Vaccine Recombinant Adsorbed (6, 11, 16,18) single dose 0.5ml Prefilled syringe (GARDASIL)	prefilled-syringe	69	3,200.00	220,800.00
959	Anti-tetanus serum (equine) 1500 IU/mL, 0.7 mL (IM) (ANTITET)	amp/vl	230	140.00	32,200.00
960	Acetylcysteine 100 mg sachet (FLUIMUCIL)	sachet	200	13.25	2,650.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : 100-2023-03-3997

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	;23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
961	Iopamidol 612 mg/mL equiv. to 300 mg Iodine, 100 ml (SCANLUX)	amp/vl	10	3,475.00	34,750.00
	OPHTHALMOLOGY DEPARTMENT				
962	Intraocular Irrigating Solution (Balanced Salt Solution) 500ml (EUROMED)	bottle	567	600.00	340,200.00
963	Lactated Ringer's Solution 1L (EUROMED)	bottle	250	85.00	21,250.00
964	Mannitol 20% 500ml (BBRAUN)	bottle	10	205.00	2,050.00
965	0.9% NACL FOR IV INFUSION SOLUTION 1L (EUROMED)	bottle	100	85.00	8,500.00
966	0.9% NaCl for Irrigation solution 1L (EUROMED)	bottle	100	85.00	8,500.00
	ANESTHETICS DRUGS				
967	Bupivacaine Hydrochloride 0.5%, 10ml (SENSORCAINE)	amp/vl	24	480.00	11,520.00
968	Lidocaine Hydrochloride 2% Local anesthesia 50ml (EUROMED)	amp/vl	2	90.00	180.00
969	Lidocaine Hydrochloride 2% (20mg/ml), 5ml (IM/IV) (EUROMED)	amp/vl	400	35.00	14,000.00
970	Lidocaine (as Hydrochloride) 2%, 1.8 mL carpule with epinephrine (local infiltration) (ZEYCO FD)	carpule	100	48.40	4,840.00
971	5% Lidocaine HCl 2% (20MG/ML) 5ml plastic polyamp (EUROMED)	polyamp	300	35.00	10,500.00
	ORAL,OPHTHALMIC,NEBULE & PSYCH. PREPARATIONS				
972	Acetazolamide 250mg tabletlet (CETAMID)	tablet/cap	500	19.00	9,500.00
973	Aciclovir 800 mg tabletlet (SYCLOVIR)	tablet/cap	50	70.00	3,500.00
974	Amlodipine besilate 10mg in blister/foil pack (AMBESYL)	tablet/cap	200	8.75	1,750.00
975	Amlodipine besilate 5mg in blister/foil pack (AMBESYL)	tablet	200	6.45	1,290.00
976	Atropine sulfate Eye Drops Solution: 1%, 5 ml w/ red bottle cap (ISOPTO ATROPINE)	bottle	50	457.50	22,875.00
977	Clonidine Hydrochloride 75mcg (CLODIN)	tablet/cap	200	20.00	4,000.00
978	Co-Amoxiclav (Amox. 500mg + Potas. Clavulanate 125mg/tabletlet (RANICLAV)	tablet/cap	200	18.50	3,700.00
979	Dorzolamide Eye Drops Solution 2%, 5ml vial (TRUSOPT)	bottle	16	1,150.00	18,400.00
980	Erythromycin eye ointment 0.5% 3.5g (SENSOMED)	tube	50	275.00	13,750.00
981	Erythromycin eye ointment 0.5% 5g (OPTRYL)	tube	50	230.00	11,500.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : FW-2023-05-3927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
982	Levofloxacin 5 mg/mL (0.5% w/v) ophthalmic solution, applicable for intracameral use, preservative free (OFTAQUIX)	bottle	200	550.00	110,000.00
983	Mefenamic acid 500mg (MECID)	tablet/cap	300	5.00	1,500.00
984	Moxifloxacin 0.5% (5mg/mL) sterile ophthalmic solution, applicable for intracameral use 3ml (AMOXIFLOX)	bottle	250	437.00	109,250.00
985	Nifedipine 10mg (NICARDIA)	tablet/cap	20	4.00	80.00
986	Ofloxacin 0.3% 5mL eye drops (OFLOBIZ)	bottle.	50	350.00	17,500.00
987	Omeprazole 20mg (OMEPHIL-20)	tablet/cap	77	25.00	1,925.00
988	Omeprazole 40mg (RANZOLE)	tablet/cap	200	35.00	7,000.00
989	Phenylephrine (as hydrochloride) 2.5%, 5ml eye drop solution (MYDFRIN)	bottle	100	622.00	62,200.00
990	Pilocarpine (as hydrochloride) 2%, 15ml Eye Drops Solution (ISOPTO CARPINE)	bottle	30	335.50	10,065.00
991	Prednisolone (as acetate) 1% Eye drops suspension, 5ml (VISTAPRED)	bottle	450	230.00	103,500.00
992	Prednisone 10mg (PRESONE)	tablet/cap	100	5.75	575.00
993	Prednisone 20mg (PROLIX)	tablet/cap	100	7.75	775.00
994	Proparacaine Hydrochloride (Proxymetacaine) 0.5% Eye drop solution, 15ml (ALCAINE)	bottle	100	898.50	89,850.00
995	Sodium Hyaluronate 0.1% (1mg/mL), 5ml Ophthalmic Solution (LACRIFRESH)	bottle	300	339.00	101,700.00
996	Timolol 0.5%, 5mL ophthalmic solution (CELSUS)	bottle	40	400.00	16,000.00
997	Tobramycin 0.3%+Dexamethasone 0.01%, 5ml Eye drops (CELSUS)	bottle	350	230.00	80,500.00
998	Tobramycin Eye drops solution 0.3%, 5ml (CELSUS)	bottle	200	215.00	43,000.00
999	Travoprost .004%, 2.5mL ophthalmic drops (TRAVATAN)	bottle	42	1,390.26	58,390.92
1000	Tropicamide Eye Drops Solution 0.5%, 5 ml (MYDRIACYL)	bottle	100	693.00	69,300.00
1001	Tropicamide + Phenylephrine HCl 5mg + 5mg/mL (eye drops) fixed dose combination, 10 mL (SANMYD-P)	bottle	200	997.50	199,500.00
	IM/IV PREPARATIONS				
1002	Amikacin Sulfate 250mg/ml, 2ml (IM/IV) (CINMIK)	amp/vl	5	90.00	450.00
1003	Amikacin Sulfate 50 mg/mL, 2 mL (IM/IV) (CINMIK)	amp/vl	5	50.00	250.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO 2023-05-8527

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: **QUEZON CITY GENERAL HOSPITAL**	Project Number	:CONSO-23-DM-0712
Company Name	: **PLANET DRUGSTORE CORPORATION**	Mode of Procurement	:Public Bidding
Address	: **137 Marina Street, Balong Bato, San Juan City**	Resolution No.	:23-PB-258
Business Type	: **Corporation Registration #CS200708928**	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1004	Ampicillin Sodium 1000mg + Sulbactam Sodium 500mg (IM/IV) (AMSULVEX)	amp/vl	43	750.00	32,250.00
1005	Ampicillin Sodium 500mg + Sulbactam Sodium 250mg (IM/IV) (AMSULVEX)	amp/vl	80	450.00	36,000.00
1006	Carbachol Intraocular Solution 0.01% 1.5 mL (MIOSTAT)	amp/vl	350	945.00	330,750.00
1007	Cefazolin Sodium 1gm (IM/IV) (FAZLIN)	amp/vl	50	200.00	10,000.00
1008	Cefazolin Sodium 500mg (IM/IV) (HAZOLIN)	amp/vl	50	200.00	10,000.00
1009	Ceftazidime pentahydrate 1g (IM, IV) (CEFTEBAS)	amp/vl	10	300.00	3,000.00
1010	Dexamethasone 4 mg/mL, 2 mL ampule/vial (IM, IV) (as sodium phosphate) (DEXAMAX)	amp/vl	92	50.00	4,600.00
1011	Dextrose 50% solution for injection 50ml (EUROMED)	amp/vl	20	65.00	1,300.00
1012	Epinephrine (adrenaline) Hydrochloride 1mg/ml, 1ml (IM, SC) (GRAND PHARMA)	amp/vl	100	80.00	8,000.00
1013	Fluorescein as sodium salt 10% (100mg/ml), 5ml (IV) (FLUORESCITE)	amp/vl	8	862.50	6,900.00
1014	Gentamicin Sulfate 40mg/ml, 2ml (IM, IV) (GENTACARE)	amp/vl	25	30.00	750.00
1015	Methylprednisolone sodium succinate powder, 125 mg/mL, 2mL vial + diluent vial (IM, IV, IV infusion) (SOLUMEDROL AOV)	amp/vl	40	2,107.05	84,282.00
1016	Nicardipine Hydrochloride 1mg/ml, 10ml (IV) (NICAPEDZ)	amp/vl	50	645.75	32,287.50
1017	Vancomycin Hydrochloride 1g (IV) (AVACOMYCIN 1)	amp/vl	40	550.00	22,000.00
1018	Vancomycin Hydrochloride 500mg (IV) (AVANCOMYCIN 500)	amp/vl	40	450.00	18,000.00
	PEDIATRICS DEPARTMENT				
	I.V. FLUIDS				
1019	Hydroxyethyl Starch 6% 500ml (SANBE HEST 200)	bottle	500	900.00	450,000.00
1020	Lactated Ringer's Solution 1L (EUROMED)	bottle	2,500	85.00	212,500.00
1021	Lactated Ringer's Solution 500ml (EUROMED)	bottle.	1,000	79.00	79,000.00
1022	Lipids 10%, 500 mL (LIPOFUNDIN)	bottle.	30	1,600.00	48,000.00
1023	Mannitol 20% 500ml (BBRAUN)	bottle.	200	205.00	41,000.00
1024	Modified Fluid Gelatin 4% 500ml solution (GELOFUSINE)	bottle.	500	1,150.00	575,000.00
1025	Peritonial Dialysis Solution w/ 1.5% dextrose 2L w/ disinfectant cap (DIANEAL PD-2 BAXTER)	bottle.	100	400.50	40,050.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : NC 2023-05-3527

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1026	0.9% NaCl for IV Infusion solution 100 mL (SAHAR)	bottle.	200	65.00	13,000.00
1027	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle.	2,000	85.00	170,000.00
1028	0.9% NaCl for IV Infusion solution 500ml (EUROMED)	bottle.	1,500	79.00	118,500.00
1029	5% Dextrose in Lactated Ringer's Solution 1L (EUROMED)	bottle.	2,500	85.00	212,500.00
1030	5% Dextrose in Lactated Ringer's Solution 500ml (EUROMED)	bottle.	1,000	79.00	79,000.00
1031	5% Dextrose in 0.3% Sodium Chloride 1L (EUROMED)	bottle.	100	85.00	8,500.00
1032	5% Dextrose in 0.3% Sodium Chloride 500ml (EUROMED)	bottle.	100	79.00	7,900.00
1033	5% Dextrose in 0.9% Sodium Chloride 1L (EUROMED)	bottle.	100	85.00	8,500.00
1034	5% Dextrose in 0.9% Sodium Chloride 500ml (EUROMED)	bottle.	700	79.00	55,300.00
1035	5% Dextrose in Balance Multiple Maintenance Solution (NM)1L (adult) (EUROMED)	bottle.	1,000	85.00	85,000.00
1036	5% Dextrose in Balance Multiple Maintenance Solution (NM) 500ml (EUROSIL-M)	bottle.	1,000	79.00	79,000.00
1037	5% Dextrose in Balance Multiple Maintenance Solution (IMB) 500ml (EUROMED)	bottle.	2,500	79.00	197,500.00
1038	5% Dextrose in Water 250ml (EUROMED)	bottle.	500	135.00	67,500.00
1039	5% Dextrose in Water 500ml (EUROMED)	bottle.	1,500	79.00	118,500.00
1040	5% Dextrose in Water 1L (EUROMED)	bottle.	500	85.00	42,500.00
1041	10% Dextrose in Water 500ml (EUROMED)	bottle.	2,000	79.00	158,000.00
	DANGEROUS DRUGS				
1042	Diazepam 5mg (VALIUM)	tablet/cap	100	11.75	1,175.00
1043	Diazepam 5 mg/mL, 2 mL (IM, IV) (VALIUM)	amp/vl	200	105.00	21,000.00
1044	Levetiracetam 500mg/5ml (IV) (PFIZER)	vial	500	3,872.00	1,936,000.00
1045	Midazolam 5mg/ml, 1ml (IM, IV) (DORMICUM)	amp/vl	300	105.35	31,605.00
1046	Midazolam 5mg/ml, 3ml (IM, IV) (DORMICUM)	amp/vl	100	200.00	20,000.00
1047	Morphine Sulfate 10 mg (HIZON)	tablet/cap	1	55.00	55.00
	ANESTHETIC DRUGS				

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date
May 23, 2023

Funds Available:

OBR : NO. 2023 05- 3927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1048	Lidocaine Hydrochloride 2% 20mg/ml, 20 ml (IM/IV) (EUROMED)	amp/vl	14	65.00	910.00
1049	Naloxone Hydrochloride 400 mcg/ml, 1 ml (IM/IV/SC) (NALOCURE)	amp/vl	1	1,400.00	1,400.00
1050	Rocuronium Bromide 10mg/ml, 5ml (IV) (KABIROC)	amp/vl	1	400.00	400.00
	ORAL,OPHTHALMIC,NEBULE & PSYCH. PREPARATIONS				
1051	Aciclovir 200 mg (ZOVIRAX)	tablet/cap	50	40.00	2,000.00
1052	Aciclovir 400 mg (SYCLOVIR)	tablet/cap	50	45.00	2,250.00
1053	Aciclovir 800 mg (SYCLOVIR)	tablet/cap	60	70.00	4,200.00
1054	Aluminum Hydroxide 225mg + Magnesium Hydroxide 200mg per 5ml suspension, 120 ml (MONNAX)	bottle.	20	105.00	2,100.00
1055	Amlodipine besilate 10mg (AMBESYL)	tablet/cap	6	8.75	52.50
1056	Amlodipine besilate 5mg (AMBESYL)	tablet/cap	6	6.45	38.70
1057	Amoxicillin Trihydrate 500mg (AMBIMOX)	tablet/cap	178	7.50	1,335.00
1058	Amoxicillin 100mg/ml granules/powder for drops (suspension),15 ml (MOXYLOR)	bottle.	500	23.00	11,500.00
1059	Amoxicillin Trihydrate 250 mg/5 mL granules/powder for suspension, 60mL (AXMEL)	bottle.	420	80.00	33,600.00
1060	Ascorbic Acid 500mg, film-coated (APCEE)	tablet.	300	2.00	600.00
1061	Ascorbic Acid (Vitamin C) 100 mg/mL drops 30 mL (CIXTOR)	bottle.	300	63.00	18,900.00
1062	Ascorbic Acid (Vitamin C) 100 mg/5 mL, 60 mL Syrup (APCEE)	bottle.	300	48.25	14,475.00
1063	Ascorbic Acid (Vitamin C) 100 mg/5 mL, 120 mL Syrup (MYREVIT-C)	bottle.	300	80.00	24,000.00
1064	Aspirin 80mg (SAPHRIN)	tablets/cap	200	1.50	300.00
1065	Azithromycin 200 mg/5 mL (as monohydrate), powder for suspension, 15 ml (AZITAS)	bottle	73	250.00	18,250.00
1066	Azithromycin 500mg (as monohydrate) (AZITHVA)	tablet/cap	100	40.00	4,000.00
1067	Baclofen 10mg (TRILAXANT)	tablet/cap	80	36.00	2,880.00
1068	Betahistine hydrochloride 8mg (VERT)	tablet/cap	30	23.00	690.00
1069	Betahistine hydrochloride 24mg (VERT)	tablet/cap	30	40.00	1,200.00
1070	Betamethasone Cream 0.1%, 5g tube (as valerate) (BETNOVATE)	tube	10	343.50	3,435.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : MA-2023-05-3987

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1071	Bisacodyl 10 mg (adult) suppository (VESILAC)	pcs	30	25.00	750.00
1072	Bisacodyl 5mg (children) suppository (DULCOLAX)	pcs	30	32.00	960.00
1073	Budesonide 250mcg/ml, 2ml (unit dose) for nebulization (BREECORT)	nebule	200	80.75	16,150.00
1074	Calcium Carbonate 500mg tabletlet/chewable (elemental calcium) (CALSAN)	tablet	100	15.00	1,500.00
1075	Captopril 25mg (HYPERSTOP)	tablet/cap	150	5.50	825.00
1076	Carbamazepine 200mg (MEZACAR)	tablet/cap	200	10.00	2,000.00
1077	Carvedilol 6.25mg (DILABLOC)	tablet/cap	10	7.25	72.50
1078	Cefalexin monohydrate 500mg (EXEL)	tablet/cap	100	9.50	950.00
1079	Cefalexin monohydrate 100mg/ml granules/powder for drops, 10 mL (EXEL)	bottle.	100	24.80	2,480.00
1080	Cefalexin 125mg/5mL, granules/powder for syrup/suspension, 30 mL (EXEL)	bottle.	100	45.00	4,500.00
1081	Cefalexin monohydrate 250 mg/5 mL granules/powder for syrup/suspension, 60 mL (EXEL)	bottle.	100	60.20	6,020.00
1082	Cefixime 100 mg/5 mL, 60 mL suspension (TRIOCEF)	bottle.	100	450.00	45,000.00
1083	Cefixime 200mg (FLAMIFIX 200MG)	tablet/cap	100	65.00	6,500.00
1084	Cefuroxime axetil 125 mg/5 mL granules for suspension, 70 ml (MEDZYME)	bottle.	200	275.00	55,000.00
1085	Cefuroxime axetil 250 mg/5 mL granules for suspension, 50 mL (MEDZYME)	bottle	195	400.00	78,000.00
1086	Cefuroxime axetil 500mg (AEROX)	tablet/cap	149	15.00	2,235.00
1087	Cetirizine dihydrochloride 10mg (SAPHZINE)	tablet/cap	200	6.00	1,200.00
1088	Cetirizine dihydrochloride 1 mg/ml solution, 60 ml (ZYRINE)	bottle.	100	55.00	5,500.00
1089	Cetirizine dihydrochloride 10 mg/ml oral drops, 10 ml (MYREX)	bottle.	100	30.00	3,000.00
1090	Chloramphenicol 125mg/5ml suspension, 60ml (as palmitate) (ANPHECLOR)	bottle.	20	102.00	2,040.00
1091	Chlorhexidine Gluconate 0.12% and 4%, 120 mL (ORAHEX)	bottle.	50	164.00	8,200.00
1092	Clopidogrel 75mg (CLOPIVAZ)	tablets/cap	7	20.00	140.00
1093	Ciprofloxacin hydrochloride 500mg (CYFROX)	tablet/cap	100	15.00	1,500.00
1094	Clarithromycin 125mg/5mL granules/powder for suspension, 50mL (CLARIGET)	bottle.	26	387.50	10,075.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanna D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : MM 2023 05 1923

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON City
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1095	Clarithromycin 250mg/5ml granules powder for suspension 70ml (CLARITHROCID)	bottle.	30	1,172.00	35,160.00
1096	Clarithromycin 500mg (KLARITHIX)	tablet.	30	40.00	1,200.00
1097	Clindamycin 75mg/5ml granules for suspension, 60 ml (as palmitate hydrochloride) (DALACIN C)	bottle.	100	700.00	70,000.00
1098	Clindamycin Hydrochloride 150mg (RM)	tablet/cap	100	35.00	3,500.00
1099	Clindamycin Hydrochloride 300mg (ACRESIL)	tablet/cap	100	10.00	1,000.00
1100	Clonidine Hydrochloride 75mcg (CLODIN)	tablets/cap	50	20.00	1,000.00
1101	Cloxacillin Sodium 500mg (PHILCLOX)	tablet/cap	50	10.00	500.00
1102	Clozapine 100mg (CLOPIXENE)	tablet/cap	4	186.00	744.00
1103	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 200mg amoxicillin (as trihydrate) + 28.5mg potassium clavulanate per 5ml granules/powder for suspension, 70ml (CLAVOXEL BID)	bottle.	29	200.00	5,800.00
1104	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 400 mg amoxicillin (as trihydrate) + 57 mg potassium clavulanate per 5mL granules/powder for suspension, 70ml (MEOXICLAV-DS)	bottle.	44	280.00	12,320.00
1105	Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) 500mg amoxicillin (as trihydrate) + 125 mg potassium clavulanate per tablet (RANICLAV)	tablet	50	18.50	925.00
1106	Cotrimoxazole (sulfamethoxazole + trimethoprim) 800 mg sulfamethoxazole + 160mg trimethoprim table (KATHREX)	tablet	19	3.00	57.00
1107	Digoxin 50mcg/mL elixir, 60mL (LANOXIN)	bottle.	20	1,100.00	22,000.00
1108	Digoxin 250 mcg (INOXIN)	tablet/cap	20	4.25	85.00
1109	Diphenhydramine Hydrochloride 50mg (HISTAZYN)	tablet/cap	30	3.48	104.40
1110	Diphenhydramine Hydrochloride 25 mg (BENADRYL AH)	tablet/cap	30	22.25	667.50
1111	Domperidone 10mg (TORIDON)	tablet/cap	10	16.50	165.00
1112	Doxycycline 100mg (as hyclate) (DOTHIX)	tablet/cap	100	10.00	1,000.00
1113	Enalapril 5 mg as maleate (NAPRILATE)	tablet/cap	44	6.66	293.04
1114	Erythromycin eye ointment 0.5% 3.5g (SENSOMED)	tube	300	300.00	90,000.00
1115	Erythromycin eye ointment 0.5% 5g (OPTRYL)	tube	500	230.00	115,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO. 2023-05-3907

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1116	Erythromycin 200mg/5ml, 60ml susp. as ethyl succinate (MONPHEVIN)	bottle.	10	146.12	1,461.20
1117	Ferrous sulfate 60mg + Folic Acid 400mcg (FERGLOBIN FA)	tablet/cap	10	3.00	30.00
1118	Ferrous sulfate 60mg > 325mg elemental iron (FERRICORE)	tablet/cap	10	3.00	30.00
1119	Ferrous sulfate 15mg/0.6ml drops 30ml (15ML) DOUBLE DOSE (FERLUM)	bottle	20	50.00	1,000.00
1120	Ferrous sulfate drops 30mg/5ml syrup 60ml (FEROLEM)	bottle	20	120.00	2,400.00
1121	Fluconazole 50mg (MYCOZOLE) .	tablet/cap	50	160.00	8,000.00
1122	Fluconazole 200mg (DIFLUCAN)	tablet/cap	50	1,000.00	50,000.00
1123	Phenytoin 50mg/ml, 2ml solution for injection (LANTIDIN)	amp/vl.	100	850.00	85,000.00
1124	Vitamin A - 25,000 IU - 250 Softgels (AFAXIN)	bottle	30	30.88	926.40
1125	Fluticasone (as propionate) + Salmeterol (as xinafoate) 50 micrograms fluticasone + 25 micrograms salmeterol x 120 actuations (with dose counter*) (SERETIDE)	bottle.	2	560.00	1,120.00
1126	Fluticasone (as propionate) + Salmeterol (as xinafoate) 250 micrograms fluticasone + 25 micrograms salmeterol x 120 actuations (FORAIR)	bottle.	2	498.00	996.00
1127	Fluticasone (as propionate) + Salmeterol (as xinafoate) 250 micrograms fluticasone + 50 micrograms salmeterol x 60 doses with dispenser DPI (SALMEFLO DPI)	bottle.	2	520.00	1,040.00
1128	Fluticasone (as propionate) 0.05%/dose x 120 doses Nasal Aqueous Solution (FLUTIMATE NS)	spray	2	450.00	900.00
1129	Furosemide 20mg (DLI)	tablet/cap	34	3.00	102.00
1130	Furosemide 40mg (FUROMED)	tablet/cap	50	5.00	250.00
1131	Gabapentin 100mg (GABIX)	tablet/cap	6	27.00	162.00
1132	Hyoscine N Butyl Bromide 10mg (HIOSPAN)	tablet/cap	20	10.00	200.00
1133	Ibuprofen 100 mg/5 mL, 60 mL syrup/suspension (MEDBUFEN)	bottle.	20	70.00	1,400.00
1134	Ipratropium + Salbutamol (for nebulization) 500 micrograms ipratropium (as bromide anhydrous) + 2.5 mg salbutamol (as base) x 2.5 mL (unit dose) (HIVENT PLUS)	nebule	1,000	27.00	27,000.00
1135	Ipratropium (as bromide) (for nebulization) 250 micrograms/mL, 2 mL (unit dose) (ATROVENT)	nebule	100	135.75	13,575.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : No. 2023 05- 3922

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order

Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1136	Lactulose 3.3 g/5 mL (66%) syrup, 120 mL (LAXAC)	bottle.	10	280.00	2,800.00
1137	Lagundi [Vitex negundo L. (Fam. Verbenaceae)] syrup , 60ml (LAGUNDEX)	bottle	5	130.00	650.00
1138	Lagundi 300mg (ASFLEM)	tablet/cap	5	4.00	20.00
1139	Lansoprazole 30 mg (LANVELL)	tablet/cap	6	50.00	300.00
1140	Levothyroxine Na 50mcg (THYDIN)	tablet/cap	6	7.00	42.00
1141	Levothyroxine Na 100mcg (THYDIN)	tablet/cap	6	12.00	72.00
1142	Losartan 50mg (as potassium salt) (VIVASARTAN)	tablet/cap	50	7.00	350.00
1143	Losartan K 50mg + Hydochlorthiazide 12.5mg (LOSAWIN-H)	tablet/cap	50	10.00	500.00
1144	Mebendazole 500mg tabletlet/chewable (KHRIZVER)	tablet	50	6.00	300.00
1145	Mebendazole 100mg/5ml, 30ml suspension (DLI)	bottle	50	30.00	1,500.00
1146	Mefenamic acid 250mg (MEFESAPH)	tablet/cap	16	4.00	64.00
1147	Mefenamic acid 500mg (MECID)	tablet/cap	16	5.00	80.00
1148	Metformin (as hydrochloride) 500mg/film coated (GLYFORMET)	tablet/cap	50	4.75	237.50
1149	Methimazole (thiamazole) 5 mg (TAPDIN)	tablet/cap	50	6.75	337.50
1150	Methotrexate 2.5 mg (as base) (METOREX)	tablet/cap	4	10.00	40.00
1151	Metronidazole 500mg (MEDGYL)	tablet/cap	100	5.00	500.00
1152	Metronidazole 125 mg/5 mL, 60 mL suspension (MEDGYL)	bottle.	100	50.00	5,000.00
1153	Methylprednisolone 4mg (MEPRESONE)	tablet/cap	100	10.50	1,050.00
1154	Metoprolol (as tartrate) 50mg (PROMETIN)	tablet/cap	5	3.00	15.00
1155	Metoprolol (as tartrate) 100mg (PROMETIN)	tablet/cap	5	5.00	25.00
1156	Montelukast (as sodium salt) 5mg Chewable (BRONAST)	tablet	50	10.00	500.00
1157	Montelukast (as sodium salt) 10mg (LEUKOREX)	tablet/cap	50	20.00	1,000.00
1158	Multivitamins per 1 ml, 15ml, drops (MULTIGEN PLUS)	bottle	100	49.75	4,975.00
1159	Multivitamins per 5 ml, 120ml, syrup (VITASAPH)	bottle	100	95.00	9,500.00
1160	Multivitamins per 5 ml, 60ml, syrup (VITASAPH)	bottle	100	65.00	6,500.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date: May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : No. 2023-05-3977

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1161	Multivitamins Adult Vit A: 600-700mcg or 2,000-2,500 IU, Vit B1: 1.3-1.7mg, Vit B2: 0.7-3mg, Vit B6: 1.6-2mg, Vit B12: 2-6mcg, Vit C: 65-80mg, Vit D: 400 IU (10 mcg) (MULTIGEN)	tablet/cap	100	5.00	500.00
1162	Mupirocin Ointment 2%, 5g (BACTRIGON)	tube	80	200.00	16,000.00
1163	Ofloxacin 200mg (FLOXA)	tablet/cap	4	10.00	40.00
1164	Olanzapine 10mg orodispersible tabletlet (ODT) (TOLANZ 10)	tablet/cap	4	131.00	524.00
1165	Olanzapine 10mg (TOLANZ 10)	tablet/cap	6	131.00	786.00
1166	Omeprazole 20mg (OMEPHIL-20)	tablet/cap	77	25.00	1,925.00
1167	Omeprazole 40mg (RANZOLE)	tablet/cap	100	35.00	3,500.00
1168	Oral Rehydration Salts (ORS 75 replacement) Sodium chloride 2.6 g, Trisodium citrate dihydrate 2.9 g, Potassium chloride 1.5 g, Glucose anhydrous 13.5 g, Total Weight — 20.5 g, Sodium 75 (DEHYDROSOL)	sachet	140	5.00	700.00
1169	Paracetamol 100mg/ml drops, 15ml (alcohol-free) (NEW MYREX)	bottle	50	30.00	1,500.00
1170	Paracetamol 125mg suppository (PORO)	supp.	200	19.50	3,900.00
1171	Paracetamol 250mg suppository (PORO)	supp.	200	21.00	4,200.00
1172	Paracetamol 500mg (ANASERAN)	tablet/cap	50	3.25	162.50
1173	Paracetamol 250 mg/5ml syrup/suspension, 60ml (alcohol-free) (MYREMOL)	bottle.	50	50.00	2,500.00
1174	Permethrin lotion 5% 60ml (LINDELL)	bottle	6	320.00	1,920.00
1175	Phenytoin (as sodium salt) 100 mg (SRIPHEN)	tablet/cap	100	16.00	1,600.00
1176	Phenobarbital 30mg (PHILUSA)	tablet/cap	428	3.90	1,669.20
1177	Phenobarbital 60mg (PHILUSA)	tablet/cap	500	5.40	2,700.00
1178	Phenobarbital 90mg (PHILUSA)	tablet/cap	500	6.90	3,450.00
1179	Potassium Chloride 750 mg durules equiv. to approximately 10 mEq potassium (KALIGEN)	tablet/cap	400	24.75	9,900.00
1180	Potassium (as citrate) 10 mEq. (KAITRATE)	tablet/cap	200	5.00	1,000.00
1181	Electrolyte Drink Na 230 mg, K 200 mg, total carbohydrates 5 g, sugar 4 g Per 250 mL (VIVALYTE)	pc	200	56.75	11,350.00
1182	Povidone Iodine 1% oral antiseptic 60ml (ALFA GARGLE)	bottle	50	89.00	4,450.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

OBR : NR-MAR-05-3927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1183	Prednisone 5mg (ORAPRED)	tablet/cap	300	2.40	720.00
1184	Prednisone 10mg (PRESONE)	tablet/cap	300	5.75	1,725.00
1185	Prednisone 20mg (PROLIX)	tablet/cap	300	7.75	2,325.00
1186	Prednisone 10 mg/5 ml suspension, 60ml (PROLIX)	bottle.	100	150.00	15,000.00
1187	Quetiapine (as Fumarate) 25mg (QTIPINE)	tablet/cap	6	30.00	180.00
1188	Quetiapine (as Fumarate) 100mg (QUETIAPRO)	tablet/cap	6	59.00	354.00
1189	Salbutamol (as sulfate) Solution for nebulization 1mg/ml, 2.5ml (unit dose) (HIVENT)	nebule	2,000	18.00	36,000.00
1190	Salbutamol (as sulfate) Solution for nebulization 2mg/ml, 2.5ml (unit dose) (HIVENT DS)	nebule	4,000	20.00	80,000.00
1191	Salbutamol 100 mcg/dose x 200 doses Metered Dose Inhaler (DERIHALER 100)	bottle.	27	260.00	7,020.00
1192	Sertraline hydrochloride 50mg (DEPERIN)	tablet/cap	8	44.19	353.52
1193	Silver Sulfadiazine Cream 1%, 25g (BURNSIL)	tube	6	120.00	720.00
1194	Sodium Valproate + Valproic Acid Oral, 500mg (333 mg sodium valproate + 145 mg valproic acid) controlled release (DIVALGEN)	tablet/cap	50	30.00	1,500.00
1195	Sucralfate 1g (ISELPIN)	tablet/cap	6	53.25	319.50
1196	Tobramycin Eye drops solution 0.3%, 5ml (CELSUS)	bottle	6	215.00	1,290.00
1197	Tranexamic acid 500mg (DLI)	tablet/cap	10	10.00	100.00
1198	Valproic Acid 250 mg/5 mL, 120 mL Syrup (DEPAKENE)	bottle.	100	730.00	73,000.00
1199	Vitamin B1 100mg, B6 5mg, B12 50mcg (B-complex) (RAPID-B100)	tablet/cap	100	8.00	800.00
1200	Zinc sulfate drops (as sulfate monohydrate) solution, (equiv. to 10 mg elemental zinc/mL) drops, 15ml (ENERZINC)	bottle	20	55.00	1,100.00
1201	Zinc sulfate syrup (as sulfate monohydrate) solution, (equiv. to 20 mg elemental zinc/5 mL), 60mL (ENERZINC)	bottle	20	78.00	1,560.00
	IM/IV PREPARATIONS				
1202	Adenosine 3 mg/ml, 2ml (IV) (ADESAN)	amp/vl	4	1,100.00	4,400.00
1203	All-in-One Admixtures 1875 ml (NUTRIFLEX LIPID PERI)	bottle.	2	5,300.00	10,600.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : No. 2023-05-3437

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1204	All-in-One Admixtures 2500 ml (KABIVEN CENTRAL)	bottle.	2	6,500.00	13,000.00
1205	Amikacin Sulfate 250mg/ml, 2ml (IM/IV) (CINMIK)	amp/vl	500	90.00	45,000.00
1206	Amikacin Sulfate 50 mg/mL, 2 mL (IM/IV) (CINMIK)	amp/vl	500	50.00	25,000.00
1207	Amiodarone Hydrochloride 50mg/ml, 3ml (IV) (EURYTHMIC)	amp/vl	10	321.25	3,212.50
1208	Amino Acids, Crystalline Standard 3.5%, 500ml bottle (IV infusion) (AMINOGEN-S)	bottle.	2	1,200.00	2,400.00
1209	Amino Acid Solutions for Infants 6%, 100 ml (AMINOSTERIL INFANT)	bottle.	30	700.00	21,000.00
1210	Aminophylline (theophylline ethylenediamine) 25mg/ml, 10ml (IV) (AMINOSOL)	amp/vl	200	70.00	14,000.00
1211	Amphotericin B (Non-Lipid Complex) 50mg lyophilized powder (IV infusion) (AMPHOTRET)	amp/vl	44	11,909.53	524,019.32
1212	Ampicillin Sodium 1000mg + Sulbactam Sodium 500mg (IM/IV) (AMSULVEX)	amp/vl	87	750.00	65,250.00
1213	Ampicillin Sodium 500mg + Sulbactam Sodium 250mg (IM/IV) (AMSULVEX)	amp/vl	100	450.00	45,000.00
1214	Ampicillin Sodium 250mg (IM/IV) (POLYPEN)	amp/vl	5,000	65.00	325,000.00
1215	Ampicillin Sodium 500mg (IM/IV) (AMPIVEX)	amp/vl	1,000	50.00	50,000.00
1216	Ampicillin Sodium 1g (IM/IV) (AMPIVEX)	amp/vl	100	125.00	12,500.00
1217	BCG vaccine, freeze-dried powder 500mcg/ml vial + 1ml diluent ampule (ID) 20 doses (GENPHARM)	amp/vl	500	650.00	325,000.00
1218	Beractant 25 mg/mL suspension, 4 mL intratracheal administration for neonatal intensive care (SURVANTA)	amp/vl	3	19,600.00	58,800.00
1219	Biphasic Isophane Human 70/30 (recombinant DNA) 100 IU/mL, 5mL (SC) (WOSULIN 70/30)	amp/vl	5	500.00	2,500.00
1220	Biphasic Isophane Human Insulin 70/30 (recombinant DNA) 100 IU/mL, 10mL (SC) (WOSULIN 70/30)	amp/vl	5	500.00	2,500.00
1221	Biphasic Isophane Human Insulin 70/30 (recombinant DNA) 100 IU/mL, 3mL glass cartridge (SC) (SCILLIN M-30)	amp/vl	5	761.00	3,805.00
1222	Calcium Gluconate 10%, 10 mL (IV) (EUROMED)	amp/vl	100	60.00	6,000.00
1223	Cefazolin Sodium 1gram (IM/IV) (FAZLIN)	amp/vl	4	200.00	800.00
1224	Cefazolin Sodium 500mg (IM/IV) (HAZOLIN)	amp/vl	4	200.00	800.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne B. Cruz 5-23-2023
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : No. 2023 05 3977

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1225	Cefepime Hydrochloride 1gram (IM, IV) (CEFEVEX)	amp/vl	10	950.00	9,500.00
1226	Cefotaxime sodium 500 mg vial + 2 mL diluent (IM, IV) (PANTAXIN)	amp/vl	500	510.00	255,000.00
1227	Cefoxitin Sodium 1gram (IM/IV) (MONOWEL)	amp/vl	10	500.00	5,000.00
1228	Ceftazidime pentahydrate 1gram (IM, IV) (CEFTEBAS)	amp/vl	150	300.00	45,000.00
1229	Ceftriaxone Sodium 1gram + 10ml diluent (IV) (KEPTRIX)	amp/vl	107	350.00	37,450.00
1230	Cefuroxime Sodium 250mg (IM, IV) (FUROCEF)	amp/vl	700	179.00	125,300.00
1231	Cefuroxime Sodium 750mg (IM, IV) (NEOCEFUXIME)	amp/vl	700	200.00	140,000.00
1232	Ciprofloxacin Lactate 2mg/ml, 100ml (IV infusion) (CIPCOR)	amp/vl	100	300.00	30,000.00
1233	Ciprofloxacin 400mg/200mL (IV infusion) or 2mg/ml, 200ml (CIPRONAT)	amp/vl	100	450.00	45,000.00
1234	Clindamycin Phosphate 150mg/ml, 2ml (IM, IV) (CLINDARENE)	amp/vl	50	275.00	13,750.00
1235	Clindamycin Phosphate 150mg/ml, 4ml (IM, IV) (CLINDARENE)	amp/vl	50	300.00	15,000.00
1236	Cyclophosphamide 1000mg powder (IV) (CYPHOS-1)	amp/vl	1	350.00	350.00
1237	Cefixime 20 mg/ml oral drops 10ml (CEFIM)	bottle.	50	446.00	22,300.00
1238	Dexamethasone 4 mg/mL, 2 mL ampul/vial (IM, IV) (as sodium phosphate) (DEXAMAX)	amp/vl	95	50.00	4,750.00
1239	Dextrose 50% solution for injection 50ml (EUROMED)	amp/vl	300	65.00	19,500.00
1240	Digoxin 250mcg/ml, 2ml (IM, IV) (CARDIOXIN)	amp/vl	10	230.00	2,300.00
1241	Diphenhydramine Hydrochloride 50mg/ml, 1ml (IM, IV) (ALLERIGHT)	amp/vl	250	50.00	12,500.00
1242	Dobutamine Hydrochloride 50mg/ml, 5ml (concentrate)(IV infusion) (DOBUKON)	amp/vl	100	300.00	30,000.00
1243	Dopamine Hydrochloride 40mg/ml, 5ml (IV) (DOPINE)	amp/vl	100	140.00	14,000.00
1244	Dopamine Hydrochloride 800mcg/ml, 250ml D5W(pre-mixed)(IV) (MYOCARD-DX)	amp/vl	100	699.00	69,900.00
1245	Epinephrine (adrenaline) Hydrochloride 1mg/ml, 1ml (IM, SC) (GRAND PHARMA)	amp/vl	300	80.00	24,000.00
1246	Furosemide 10mg/ml, 2ml(IM,IV) (FUROSAN)	amp/vl	162	25.00	4,050.00
1247	Gentamicin Sulfate 40mg/ml, 2ml (IM, IV) (GENTACARE)	amp/vl	64	30.00	1,920.00
1248	Haloperidol 5mg/ml, 1ml (IM) (PSYQURE)	amp/vl	4	777.00	3,108.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : nu 2023- 05- 3578

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1249	Heparin (unfractionated) sodium 1000iu/ml, 5ml (IV infusion, SC) (bovine origin) (APRINOL)	amp/vl	5	120.00	600.00
1250	Heparin (unfractionated) sodium 5000iu/ml, 5ml (IV infusion, SC) (bovine origin) (APRINOL)	amp/vl	3	300.00	900.00
1251	Hepatitis B Vaccine (recombinant DNA) 10mcg/0.5ml monodose (IM) (pediatric) (GENVAC B)	amp/vl	4,000	420.00	1,680,000.00
1252	Human Albumin 20% IV Infusion Solution 50ml (ALBUMAX)	bottle	120	4,200.00	504,000.00
1253	Human Albumin 25% IV infusion Solution 50ml (PLASBUMIN-25)	bottle	20	4,500.00	90,000.00
1254	Hepatitis B Immunoglobulin (human) 0.5ml (IM) (HEPABIG)	amp/vl	20	2,250.00	45,000.00
1255	Hydrocortisone Sodium Succinate 100mg (IV) (CORTEF)	amp	500	120.00	60,000.00
1256	Hydrocortisone Sodium Succinate 250mg (IV) (GORTIZONE)	amp/vl	150	180.00	27,000.00
1257	Hyoscine N Butyl Bromide 20mg/ml, 1ml (IM, IV, SC) (SPASBASCINE)	amp/vl	40	60.00	2,400.00
1258	Immunoglobulin Normal, Human 50mg/ml, 50ml (IGIV) (IV) (IV GLOBULIN)	amp/vl	100	18,250.00	1,825,000.00
1259	Isophane Insulin Human (recombinant DNA) 100 IU/mL, 10mL(SC) (WOSULIN N)	amp/vl	4	500.00	2,000.00
1260	Ketorolac tromethamol 30mg/ml, 1ml (IM, IV) (ANALAC)	amp/vl	8	120.00	960.00
1261	Meropenem trihydrate 1gram powder (IV) (MEROMAX)	amp/vl	200	850.00	170,000.00
1262	Meropenem trihydrate 500mg powder (IV) (MEROMAX)	amp/vl	800	550.00	440,000.00
1263	Methotrexate 25mg/ml, 2ml (IM, IV) (EMTHEX)	amp/vl	6	420.00	2,520.00
1264	Methylprednisolone sodium succinate powder, 125 mg/mL, 2mL vial + diluent vial (IM, IV, IV infusion) (SOLUMEDROL AOV)	amp/vl	20	2,107.05	42,141.00
1265	Methylprednisolone sodium succinate powder 1gram/16ml + diluent vial (IM, IV, IV infusion) (SOLUMEDROL)	amp/vl	20	8,496.06	169,921.20
1266	Metoclopramide Hydrochloride 5mg/ml, 2ml (IM, IV) (METOCLOSIL)	amp/vl	20	30.00	600.00
1267	Metronidazole 5mg/ml, 100ml (IV infusion) (EUROMET)	bottle.	100	60.00	6,000.00
1268	Nicardipine Hydrochloride 1mg/ml, 10ml (IV) (NICAPEDZ)	amp/vl	10	645.75	6,457.50
1269	Norepinephrine bitartrate 1mg/ml, 10 ml (concentrate solution for infusion) (DOPAQURE)	amp/vl	30	1,420.13	42,603.90
1270	Norepinephrine bitartrate 1mg/ml, 4 ml (IV infusion) (QUPRIN)	amp/vl	30	600.00	18,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne B. Cruz May 25, 2023
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : NO OBR. AT- 07937

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order

Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1271	Omeprazole powder 40mg + 10ml solvent (IV) (RANZOLE)	amp/vl	100	250.00	25,000.00
1272	Ondansetron 2 mg/ml, 2ml (IM, IV) (EMISTOP)	amp/vl	6	300.00	1,800.00
1273	Oxacillin Sodium 500mg (IM, IV) (CILVEX)	amp/vl	425	220.00	93,500.00
1274	Paracetamol 10mg/ml, 100ml solution for infusion (IV) (THERMODOL)	amp/vl	44	429.00	18,876.00
1275	Paracetamol 150 mg/mL, 2mL ampule solution for injection (IM/IV) (AMCETAM)	amp	300	20.00	6,000.00
1276	Penicillin G Crystalline (benyzylpenicillin sodium) 1,000,000 units (IM/IV) (CATHAY)	amp/vl	178	27.68	4,927.04
1277	Penicillin G Benzathine (benzathine benzylpenicillin) 1,200,000 units vial (MR) (IM) (ZALPEN)	vl	178	250.00	44,500.00
1278	Penicillin G Crystalline (benyzylpenicillin sodium) 5,000,000 units (IM/IV) (LAKESIDE)	amp/vl	200	30.00	6,000.00
1279	Phytomenadione 10 mg/mL, 1 mL (IM, IV, SC) (as mixed micelle) (AMBIVIT K)	amp/vl.	1,000	40.00	40,000.00
1280	Piperacillin Sodium 2gram + Tazobactam Sodium 250mg (IV infusion) (VIGOCID)	vl.	1,000	350.00	350,000.00
1281	Piperacillin Sodium 4gram + Tazobactam Sodium 500mg (IV infusion) (VIGOCID)	vl.	1,000	480.00	480,000.00
1282	Potassium Chloride 2mEq/ml, 20ml (IV Infusion) (EUROMED)	vial	200	48.75	9,750.00
1283	Ranitidine Hydrochloride 25mg/ml, 2ml (IM, IV, IV infusion) (RANITEIN)	amp/vl.	100	25.00	2,500.00
1284	Regular, Insulin (recombinant DNA human) 100 IU/mL, 10 mL (SC, IV/IM) (WOSULIN R)	amp/vl	10	500.00	5,000.00
1285	Sodium Bicarbonate 1mEq/ml, 100ml (adult) (IV infusion) (BBRAUN)	amp/vl.	26	550.00	14,300.00
1286	Sodium Bicarbonate 1mEq/ml, 50ml (adult) (IV infusion) (HOSPIRA)	amp/vl.	200	159.75	31,950.00
1287	Sodium Chloride 2.5mEq/ml, 20ml (EUROMED)	amp/vl	300	60.00	18,000.00
1288	Sterile Water for Injection 50ml (no preservative) (EUROMED)	bag	300	50.00	15,000.00
1289	Sterile Water for Injection 5ml (EUROMED)	amp/vl	160	30.00	4,800.00
1290	Tetanus Immunoglobulin (human) 250 IU/mL, 1 mL pre-filled syringe (IM) (TETAGAM)	p-syr.	10	1,100.00	11,000.00
1291	Tetanus toxoid, 0.5 ml (IM) (IMATET)	amp/vl	10	100.00	1,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
MAY 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

OBR : 1st Qtr. 2023 05-3927

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order

Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1292	Tramadol Hydrochloride 50mg/ml, 1ml (IM, IV, SC) (PEPTRAD)	amp/vl	50	75.00	3,750.00
1293	Tramadol Hydrochloride 50mg/ml, 2ml (IM, IV, SC) (AMBIDOL)	amp/vl	50	50.00	2,500.00
1294	Tranexamic Acid 100mg/ml, 5ml (IM, IV) (ANCLOTIC)	amp/vl	100	100.00	10,000.00
1295	Valproic Acid 250 mg/5 mL, 120 mL Syrup (DEPAKENE)	bottle.	60	730.00	43,800.00
1296	Vancomycin Hydrochloride 1gram (IV) (AVANCOMYCIN)	amp/vl	500	550.00	275,000.00
1297	Vancomycin Hydrochloride 500mg (IV) (AVANCOMYCIN)	amp/vl	500	450.00	225,000.00
1298	Vitamin B1 100mg + B6 100mg + B12 1mg per 3ml (IV) (NEUROBE)	amp/vl	100	140.00	14,000.00
1299	Acetylcysteine 100 mg sachet (FLUIMUCIL)	sachet	40	13.25	530.00
1300	Acetylcysteine 100mg/5 mL granules for suspension, 150 Ml (FLUIMUCIL-100ML)	bottle	17	309.00	5,253.00
1301	Acetylcysteine 200mg sachet (FLUIMUCIL)	sachet	38	17.50	665.00
1302	Allopurinol 300mg tabletlet (LORICID)	tablet	6	15.00	90.00
1303	Atorvastatin calcium 10 mg tabletlet (AVATOR)	tablet	9	10.00	90.00
1304	Budesonide 80mcg + Formoterol 4.5mcg (as fumarate dihydrate) x 60 doses with dispenser (DPI) (SYMBICORT)	bottle	20	967.00	19,340.00
1305	Cefotaxime 250mg vial + 2 mL diluent (IM, IV) (PANTAXIM)	amp/vl	500	510.00	255,000.00
1306	Ciclosporin 100 mg capsule (SANDIMMUN NEORAL)	cap	6	208.50	1,251.00
1307	Ciclosporin 25 mg capsule (SANDIMMUN NEORAL)	cap	6	52.00	312.00
1308	Cotrimoxazole (400 mg Sulfamethoxazole + 80 mg trimethoprim/ 5 ml suspension, 60 ml (ZOLMED FORTE)	bottle	6	75.00	450.00
1309	Cyclophosphamide powder, 500mg vial (CYPHOS-500)	vl	5	300.00	1,500.00
1310	Diphenhydramine 12.5 mg/5ml, 60 ml syrup (HISTAZYN)	bottle.	30	225.00	6,750.00
1311	Domperidone 1mg/ml suspension, 60 mL (DOMPY)	bottle	20	120.00	2,400.00
1312	Epoetin Alfa (recombinant human erythropoietin) 2000 IU/ 0.6ml, pre-filled syringe with needle (IV,SC) (EPOKINE)	p-syr	20	650.00	13,000.00
1313	Epoetin Alfa (recombinant human erythropoietin 4000 IU/ 0.4 ml, pre-filled syringe with needle (IV, SC) (EPOLITT)	p-syr	20	750.00	15,000.00
1314	Famotidine 20mg (HISTA-BLOC)	vial	76	300.00	22,800.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date

May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : no. 2023 01. 3977

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1315	Fusidic Acid Eye Drops Suspension 1%, 5g tube (as sulfate) (FUCITHALMIC)	tube	5	750.00	3,750.00
1316	Sevelemar carbonate 800mg tablet (RENVELA)	tablet	7	56.24	393.68
1317	Lung Surfactant intratracheal suspension 25 mg/ 4ml (SURVANTA)	vial	49	19,600.00	960,400.00
	PSYCHIATRY DEPARTMENT				
1318	Biperiden hydrochloride 2mg (BIZYX)	tablet/cap	180	16.00	2,880.00
1319	Chlorpromazine Hydrochloride 100mg (ZYCLORAN)	tablet/cap	290	13.40	3,886.00
1320	Diphenhydramine Hydrochloride 50mg (HISTAZYN)	tablet/cap	250	3.48	870.00
1321	Escitalopram oxalate 10mg (ESCINAL)	tablet/cap	480	35.00	16,800.00
1322	Lithium Carbonate MR 450mg (LITCARB)	tablet/cap	450	16.00	7,200.00
1323	Olanzapine 10mg orodispersible tablet(ODT) (TOLANZ)	tablet	80	131.00	10,480.00
1324	Olanzapine 10mg (TOLANZ)	tablet/cap	300	131.00	39,300.00
1325	Quetiapine (as Fumarate) 25mg (QTIPINE 25)	tablet/cap	550	30.00	16,500.00
1326	Quetiapine (as Fumarate) 100mg (QUETIAPRO)	tablet/cap	220	59.00	12,980.00
1327	Risperidone 2mg orodispersible tablet (RISGEN)	tablet	200	32.00	6,400.00
1328	Sertraline hydrochloride 50mg (DEPERIN)	tablet/cap	480	44.19	21,211.20
1329	Sodium Valproate + Valproic Acid Oral, 500mg (333 mg sodium valproate + 145 mg valproic acid) controlled release (DIVALGEN)	tablet/cap	480	30.00	14,400.00
1330	Haloperidol 5mg/ml, 1ml (IM) (PSYQURE)	amp/vl	20	777.00	15,540.00
1331	Fluphenazine Decanoate 25mg/mL x 10mL (IM) (PSYCOSIN)	vial	20	225.00	4,500.00
	SURGERY DEPARTMENT				
1332	Lactated Ringer's Solution 1L (EUROMED)	bottle.	2,000	85.00	170,000.00
1333	Mannitol 20% 500ml (OSMOFUNDIN)	bottle.	600	205.00	123,000.00
1334	0.9% NaCl for IV Infusion solution 1L (EUROMED)	bottle.	2,000	85.00	170,000.00
1335	0.9% NaCl for Irrigation solution 1L (EUROMED)	bottle.	2,800	85.00	238,000.00
1336	5% Dextrose in Lactated Ringer's Solution 1L (EUROMED)	bottle.	2,000	85.00	170,000.00
1337	5% Dextrose in 0.3% Sodium Chloride 1L (EUROMED)	bottle.	800	85.00	68,000.00
1338	5% Dextrose in 0.3% Sodium Chloride 500ml (EUROMED)	bottle.	400	79.00	31,600.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO 2023-05-3977

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order

Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:

Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL

Delivery Schedule : Upon Request by the End-User until December 31, 2023

Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1339	5% Dextrose in Balance Multiple Maintenance Solution (NM) 1L (EUROSOL-M)	bottle.	300	85.00	25,500.00
1340	5% Dextrose in Water 250ml (EUROMED)	bottle.	200	135.00	27,000.00
1341	Isotonic Electrolyte Sodium Chloride 1L (STEROFUNDIN)	bottle.	530	320.00	169,600.00
	ORAL,OPHTHALMIC,NEBULE & PSYCH. PREPARATIONS				
1342	Acetylcysteine 600mg effervescent tabletlet (FLUIMUCIL)	tablet	829	30.00	24,870.00
1343	Ascorbic Acid 500mg, film-coated (APCEE)	tablet	840	2.00	1,680.00
1344	Bisacodyl 10 mg (adult) suppository (VESILAC)	supp	840	25.00	21,000.00
1345	Cefuroxime axetil 500mg (AEROX)	tablet/cap	7,476	15.00	112,140.00
1346	Celecoxib 200mg (EMICOX)	tablet/cap	6,000	7.75	46,500.00
1347	Ferrous sulfate 60mg > 325mg elemental iron (FERRICORE)	tablet/cap	600	3.00	1,800.00
1348	Lactulose 3.3 g/5 mL (66%) syrup, 120 mL (LAXAC)	bottle	400	280.00	112,000.00
1349	Multivitamins Adult Vit A: 600-700mcg or 2,000-2,500 IU, Vit B1: 1.3-1.7mg, Vit B2: 0.7-3mg, Vit B6: 1.6-2mg, Vit B12: 2-6mcg, Vit C: 65-80mg, Vit D: 400 IU (10 mcg) (MULTIGEN)	tablet/cap	6,000	5.00	30,000.00
1350	Potassium Chloride 750 mg durules equiv. to approximately 10 mEq potassium (KALIGEN)	tablet/cap	250	24.75	6,187.50
1351	Salbutamol (as sulfate)Solution for nebulization 1mg/ml,2.5ml(unit dose) (HIVENT)	nebule	250	18.00	4,500.00
1352	Silver Sulfadiazine Cream 1%, 25g (BURNSIL)	tube	70	120.00	8,400.00
1353	Ceftriaxone Sodium 1gram + 10ml diluent (IV) (KEPTRIX)	amp/vl	214	350.00	74,900.00
1354	Cefuroxime Sodium 750mg (IM, IV) (NEOCEFUXIME)	amp/vl	1,000	200.00	200,000.00
1355	Clindamycin Phosphate 150mg/ml, 4ml (IM, IV) (CLINDARENE)	amp/vl	350	300.00	105,000.00
1356	Dobutamine Hydrochloride 50mg/ml, 5ml (concentrate) (IV infusion) (DOBUKON)	amp/vl	300	300.00	90,000.00
1357	Enoxaparin Sodium 100mg/ml, 0.4ml pre-filled syringe (SC) (LOMOH)	p-syr.	100	500.00	50,000.00
1358	Epinephrine (adrenaline) Hydrochloride 1mg/ml, 1ml (IM, SC) (GRAND PHARMA)	amp/vl	400	80.00	32,000.00
1359	Furosemide 10mg/ml, 2ml (IM, IV) (FUROSAN)	amp/vl	162	25.00	4,050.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
May 23, 2023
Signature Over Printed Name of Supplier / Date

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO-2023-05-3937

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

QUEZON CITY
Great.Green.Growing.

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1360	Gentamicin Sulfate 40mg/ml, 2ml (IM, IV) (GENTACARE)	amp/vl	42	30.00	1,260.00
1361	Human Albumin 20% IV infusion Solution 50ml (ALBUMAX)	bottle	150	4,200.00	630,000.00
1362	Human Albumin 25% IV infusion Solution 50ml (PLASBUMIN)	bottle	150	4,500.00	675,000.00
1363	Hydrocortisone Sodium Succinate 100mg (IV) (CORTEF)	amp/vl	300	120.00	36,000.00
1364	Hyoscine N Butyl Bromide 20mg/ml, 1ml (IM, IV, SC) (SPASBASCINE)	amp/vl	300	60.00	18,000.00
1365	Iopamidol 612 mg/mL equiv. to 300 mg iodine, 100 ml (SCANLUX)	amp/vl	60	3,475.00	208,500.00
1366	Iopamidol 612 mg/mL equiv. to 300 mg iodine, 50 ml (SCANLUX)	amp/vl	60	1,975.00	118,500.00
1367	Meropenem trihydrate 1g powder (IV) (MEROMAX)	amp/vl	150	850.00	127,500.00
1368	Metoclopramide Hydrochloride 5mg/ml, 2ml (IM, IV) (METOCLOSIL)	amp/vl	600	30.00	18,000.00
1369	Metronidazole 5mg/ml, 100ml (IV infusion) (EUROMET)	bottle.	800	60.00	48,000.00
1370	Nicardipine Hydrochloride 1mg/ml, 10ml (IV) (NICAPEDZ)	amp/vl	800	645.75	516,600.00
1371	Norepinephrine bitartrate 1mg/ml, 2 ml (IV infusion) (NORPHED)	amp/vl	800	450.00	360,000.00
1372	Omeprazole powder 40mg + 10ml solvent (IV) (RANZOLE)	amp/vl	2,000	250.00	500,000.00
1373	Ondansetron 2 mg/ml, 2ml (IM, IV) (EMISTOP)	amp/vl	280	300.00	84,000.00
1374	Paracetamol 10mg/ml, 100ml solution for infusion (IV) (THERMODOL)	amp/vl	267	429.00	114,543.00
1375	Paracetamol 150 mg/mL, 2mL ampule solution for injection (IM/IV) (AMCETAM)	amp/vl	1,000	20.00	20,000.00
1376	Penicillin G Benzathine (benzathine benzylpenicillin) 1,200,000 units vial (MR) (IM) (ZALPEN)	amp/vl	534	250.00	133,500.00
1377	Piperacillin Sodium 4gram + Tazobactam Sodium 500mg (IV infusion) (VIGOCID)	amp/vl	600	480.00	288,000.00
1378	Potassium Chloride 2mEq/ml, 20ml (IV Infusion) (EUROMED)	amp/vl	400	48.75	19,500.00
1379	Ranitidine Hydrochloride 25mg/ml, 2ml (IM, IV, IV infusion) (RANITEIN)	amp/vl.	280	25.00	7,000.00
1380	Sodium Bicarbonate 1mEq/ml, 100ml (adult) (IV infusion) (BBRAUN)	amp/vl.	78	550.00	42,900.00
1381	Sterile Water for Injection 50ml (no preservative) (EUROMED)	bag	2,000	50.00	100,000.00
1382	Tetanus Immunoglobulin (human) 250 IU/mL, 1 mL pre-filled syringe (IM) (TETAGAM)	p-syr.	2,500	1,100.00	2,750,000.00
1383	Tetanus toxoid, 0.5 ml (IM) (IMATET)	amp/vl.	2,000	100.00	200,000.00

MA. JOSEFINA G. BELMONTE
City Mayor

Joanne B. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date
May 23, 2023

Funds Available:

OBR : NO-2023-05-3977

RUBY G. MANANGU
City Accountant

Approved Budget for the Contract : 112,293,945.76

Republic of the Philippines
PROCUREMENT DEPARTMENT
Quezon City Government

PO Number **2305037**

Purchase Order Date: MAY 19 2023

Procuring Unit	: QUEZON CITY GENERAL HOSPITAL	Project Number	:CONSO-23-DM-0712
Company Name	: PLANET DRUGSTORE CORPORATION	Mode of Procurement	:Public Bidding
Address	: 137 Marina Street, Balong Bato, San Juan City	Resolution No.	:23-PB-258
Business Type	: Corporation Registration #CS200708928	TIN Number	:006-745-752-000
		Contact Number	:

Sir/Madam:
Please furnish this office the following articles subject to the terms and conditions contained here:

Place of Delivery : QUEZON CITY GENERAL HOSPITAL
Delivery Schedule : Upon Request by the End-User until December 31, 2023
Payment Term : Credit

Stock No.	Item	Unit of Issue	QTY	Unit Cost	Amount
1384	Tramadol Hydrochloride 50mg/ml, 1ml (IM, IV, SC) (PEPTRAD)	amp/vl.	1,000	75.00	75,000.00
1385	Tranexamic Acid 100mg/ml, 5ml (IM, IV) (ANCLOTIC)	amp/vl.	900	100.00	90,000.00
1386	Vancomycin Hydrochloride 1gram (IV) (AVANCOMYCIN)	amp/vl.	451	550.00	248,050.00
1387	Vitamin B1 100mg + B6 100mg + B12 1mg per 3ml (IV) (NEUROBE)	amp/vl.	500	140.00	70,000.00
	DANGEROUS DRUGS				
1388	Diazepam 5 mg/mL, 2 mL (IM, IV) (VALIUM)	amp/vl.	200	105.00	21,000.00
1389	Nalbuphine Hydrochloride 10mg/ml, 1ml (IM, IV, SC) (NUBAIN)	amp/vl.	200	163.75	32,750.00
	ANESTHETICS DRUGS				
1390	Lidocaine Hydrochloride 2% Local anesthesia 50ml (EUROCAINE)	amp/vl.	750	90.00	67,500.00
1391	Lidocaine (as Hydrochloride) 2%, 1.8 mL carpule with epinephrine (local infiltration) (ZEYCO)	carp.	200	48.40	9,680.00
1392	0.9% Sodium Chloride 50ml bottle/bag (IV infusion) (EUROMED)	amp/vl.	92	49.50	4,554.00
	TREATMENT HUB				
1393	Azithromycin 500mg (as monohydrate) (AZITHVA)	tablet/cap	260	40.00	10,400.00
1394	COTRIMOXAZOLE (sulfamethoxazole + trimethoprim) 800 mg sulfamethoxazole + 160mg trimethoprim tablet (ZOLBACH)	tablet	19,168	3.00	57,504.00
1395	FLU VACCINE 5ml/vial, 10doses/vial (FLUARIX TETRA)	vial	50	800.00	40,000.00
1396	FLUCONAZOLE 200mg (DIFLUCAN)	tablet/cap	390	1,000.00	390,000.00
1397	HEPATITIS B VACCINE 10ml/10doses/vial (GENVAC B)	vial	20	420.00	8,400.00
1398	HUMAN PAPILOMAVIRUS VACCINE Recombinant (6, 11, 16,18) single dose 0.5ml Prefilled syringe (GARDASIL)	Prefilled - syringe	133	3,100.00	412,300.00
1399	PNEUMOCOCCAL POLYSACCHARIDE VACCINE (PPSV23) 1 dose vial, 0.5ml, intramuscular or subcutaneous. (PNEUMOVAX23)	vial	140	2,000.00	280,000.00
1400	PNEUMOCOCCAL VACCINE (PCV13), 1 dose vial 0.5ml (PREVENAR)	vial	160	3,450.00	552,000.00
	****** Nothing Follows ******				

Total Amount : 112,055,487.00

Total Amount In Words (Pesos): One Hundred Twelve Million Fifty-Five Thousand Four Hundred Eighty-Seven Pesos Only

MA. JOSEFINA G. BELMONTE
City Mayor

02983817

Joanne D. Cruz
Authorized Representative
Planet Drugstore Corp.
Signature Over Printed Name of Supplier / Date May 23, 2023

Funds Available:

RUBY G. MANANGU
City Accountant

OBR : NO-2023-05-09427

Approved Budget for the Contract : 112,293,945.76

TERMS AND CONDITIONS

1. ALL PRICES INDICATED HEREIN ARE VALID, BINDING AND EFFECTIVE AT LEAST WITHIN THIRTY (30) CALENDAR DAYS FROM DATE OF RECEIPT.
2. AWARDEE shall be responsible for the source(s) of its supplies/materials/equipment and shall make deliveries in accordance with the schedule, quality and specification of the award and purchase order. Failure by the AWARDEE to comply with the same shall be a ground for cancellation of the award and purchase order issued to that AWARDEE and for re-awarding the item(s) to the ALTERNATE AWARDEE.
3. AWARDEE shall pick up purchase order(s) issued in its favor within three (3) days after receipt of notice to that effect. A telephone call, fax transmission or electronic mail (e-mail) shall constitute an official notice to the AWARDEE. Thereafter, if the purchase order(s) remains unclaimed, the said purchase order(s) shall be sent by mailing or courier, messengerial service to the AWARDEE. To avoid delay in the delivery of the requesting end-user's requirement, all DEFAULTING AWARDEES shall be precluded from proposing or submitting a substitute sample.
4. Subject to the provisions of the preceding paragraph, where AWARDEE has accepted a purchase order but fails to deliver the required product(s) within the time called for in the same order, the delivery period may be extended a maximum of fifteen (15) calendar days under liquidated damages to make good the delivery. Thereafter, if AWARDEE has not completed the
5. delivery within the extended period, the subject purchase order shall be cancelled and the award for the undelivered balance, withdrawn from that AWARDEE. The BAC-Goods and Services shall then purchase the required item(s) from such other source(s) as it may determine, with the difference in price to be charged against the DEFAULTING AWARDEE. Refusal by the DEFAULTING AWARDEE to shoulder the price difference shall be ground for its disqualification from future bids of the same items, without prejudice to the imposition of other sanction as prescribed under RA 9184 and its RIRR.
6. When the supplier fails to satisfactorily deliver goods/services under the contract within the specified delivery schedule, inclusive of duly granted time extensions, if any, the supplier shall be liable for damages for the delay and shall pay the procuring entity liquidated damages, not by way of penalty, an amount equal to one-tenth (1/10) of one percent (1%) of the cost of the delayed goods/services scheduled for delivery for everyday of delay until such goods/services are finally delivered and accepted by the procuring entity concerned.
7. Rejected deliveries shall be construed as non-delivery of product(s)/item(s) so ordered and shall be subject to liquidated damages, subject to the terms and conditions prescribed under paragraph 4 hereof.
8. Supplier shall guarantee its deliveries to be free from defects. Any defective item(s)/product(s), therefore that maybe discovered by the ***Quezon City Government*** within three (3) months after acceptance of the same, shall be replaced by the supplier within seven (7) calendar days upon receipt of a written notice to that effect.
9. All duties, excise and other taxes and revenue charges, if any, shall be for the supplier's account.
10. As a pre-condition to payment, IMPORTANT DOCUMENTS specifically showing the condition and serial numbers of the imported equipment purchased should be submitted by the supplier to the ***Quezon City Government.***
11. All transactions are subject to applicable withholding taxes in accordance with existing BIR rules and regulations.
12. Supplier shall furnish the End-user through the City General Services Department stockroom, the articles, described above;
13. The ***Quezon City Government*** reserves the right to accept or reject delivered articles if found not in conformity to the specifications, terms and conditions stipulated.
14. Provisions contained in Title VI, Book IV of the Civil Code of the Philippines on Sales are hereby incorporated and made as an integral part hereof.
15. This contract shall also serve as ***Notice to Proceed,*** to take effect on MAY 2 3 2023 and to expire on - DEC 3 1 2023.

CONFORME:

JOANNE [signature]
SIGNATURE OVER PRINTED NAME

AUTHORIZED REPRESENTATIVE
IN THE CAPACITY OF

May 23, 2023
DATE

Duly authorized to sign this Purchase Order for and on behalf of PLANET DRUGSTORE CORP
COMPANY NAME

SUBSCRIBED AND SWORN to before me this 23 day MAY 2023 at QUEZON CITY Philippines. Affiant personally known to me and were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiants exhibited to me his/her UMID ID with his/her photograph and signature appearing thereon with No. # 0111-9860682-3.

Doc. No. 296
Page No. 60
Book No. CII
Series of 2023

ATTY. ELISEO S. CALMA, JR.
Quezon City Notary Public
Until Dec. 31, 2023
Roll No. 50183
PTR No. 4007172-D, 01/03/2023, Q.C.
IBP No. [illegible]
MCLE Comp. No. VII-0006924 Until April 14, 2025
Adm Matter No. NP-067 (2022-2023)

******This Purchase Order shall be deemed invalid without Notary Seal (for project amounting to Php2,500,000.00 and above)***