

PURCHASE ORDER

Province of Davao de Oro  
Agency/Procuring Entity

DEC 11 2025

Supplier: BEROVAN MARKETING, INC.	PO Number: 25121973
Address:	Date: 12/10/25
E-mail Address:	Mode of Procurement: SVP
Tel. No.:	PR Number: 25-C0920
TIN: 310-215-020-000	

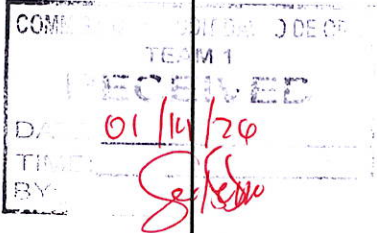
Gentlemen:  
Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery: PGSO WAREHOUSE	Delivery Term:
Date of Delivery: 10 DAYS	Payment Term:

No.	Stock No.	Unit of Issue	Quantity	Description	Unit Cost	Amount
1	41758N	unit/s	12.00	BP Apparatus (Adult)	8,785.00	105,420.00
2	41759N	unit/s	10.00	ALPK2 500W3 BP Apparatus (Pedia)	8,785.00	87,850.00
3	16229	pc/s	4.00	ALPK2 500W3 Infra Red Digital Thermometer	2,850.00	11,400.00
4	41760N	unit/s	6.00	SUNRAY Mayo Tray (Stainless Steel)	26,000.00	156,000.00
5	42178N	unit/s	12.00	MAK Nebulizer Compressor Machine	9,495.00	113,940.00

TERMS AND CONDITIONS:

- Warranty period of 1 year.
- In the event that the equipment/machine provided by the supplier/bidder requires repair or maintenance, which necessitates its removal from the end user's premises, the supplier/bidder shall provide a service unit to the end user. This service unit shall be made available to the end user at no additional cost and shall be of similar specifications and



Total Amount in Words:

In case of failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for every day of delay shall be imposed.

Conform		Very truly	
	Signature over printed name of		ENGR. RAUL G. MABANGLO
	Date		Governor
			Authorized Official

GENERAL  
OBR No.: 0078-12-25-103  
Responsibility Center:  
Amount: 820,553.65

(In case of Negotiated Purchase pursuant to section 369(a) of RA 7180, this portion must be  
Approved per Sanggunian Resolution \_\_\_\_\_  
Certified \_\_\_\_\_ Date \_\_\_\_\_

PURCHASE ORDER

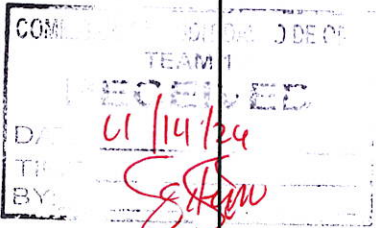
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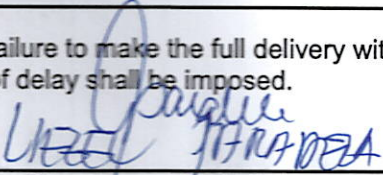
Place of Delivery: PGSO WAREHOUSE	Delivery Term:
Date of Delivery: 10 DAYS	Payment Term:

No.	Stock No.	Unit of Issue	Quantity	Description	Unit Cost	Amount
6	41753N	unit/s	7.00	functionality as the original equipment/machine.  PULMO AIDE Pulse Oximeter - Tabletop	21,995.25	153,966.75
7	01863	unit/s	6.00	CHOICEMED Suction Machine w/ complete accessories  Suction Machine w/ complete accessories Technical Specifications Type: Heavy-duty, oil-free piston-type suction machine for hospital use Vacuum Pressure: At least 0.08 MPa (around 600 mmHg), adjustable Suction Capacity / Flow Rate: At least 20 liters per minute, continuous operation Collection Bottle: At least 2,000 mL capacity (preferably double bottle 2 x 2.5 L), autoclavable and shatterproof, with overflow protection Filter System: With bacterial/viral filter and overflow safety Noise Level: Not more than 60 decibels (quiet operation) Controls: Adjustable vacuum knob and pressure gauge (in mmHg or kPa)	10,996.15	65,976.90



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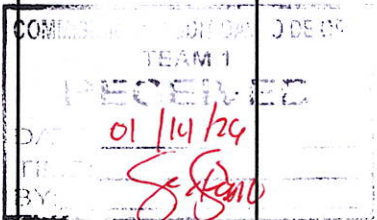
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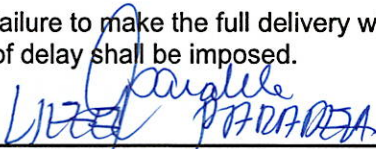

Place of Delivery: PGSO WAREHOUSE	Delivery Term:
Date of Delivery: 10 DAYS	Payment Term:

No.	Stock No.	Unit of Issue	Quantity	Description	Unit Cost	Amount
				<b>Power Supply: 220–240 volts, 50/60 Hz</b> <b>Pump Type: Oil-free, maintenance-free, suitable for continuous use</b> <b>Safety Features: Overflow valve, backflow prevention, and fuse or circuit protection</b> <b>Accessories Included:</b> <ul style="list-style-type: none"><li>• 2 pcs suction tubing (medical grade, at least 1.5 m each)</li><li>• 1 pc Yankauer suction tip (sterile)</li><li>• 1 pc bacterial/viral filter</li><li>• 1 pc spare fuse</li><li>• 1 pc power cord (hospital-type plug)</li><li>• User manual and test/calibration certificate</li></ul>		
8	41755N	unit/s	14.00	<b>UNION</b> <b>Wheelchair - Durable/Hospital Grade (Manual)</b>  <b>TECHNICAL SPECIFICATIONS:</b>  <b>Frame: Heavy-duty steel or powder-coated steel; corrosion-resistant</b>  <b>Load Capacity: Minimum 100 kg</b>  <b>Seat Width: 43–50 cm (standard to wide)</b>  <b>Rear Wheels: 24-inch, solid type</b>	9,000.00	126,000.00



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Conform	 Signature over printed name of Date 12-11-25	Very truly	 <b>ENGR. RAUL G. MABANGLO</b> Governor Authorized Official
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GENERAL OBR No.: 0678-12-25-103 Responsibility Center: Amount: 820,553.65
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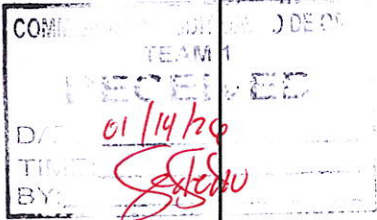
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No.	Stock No.	Unit of Issue	Quantity	Description	Unit Cost	Amount
				<p>Front Wheels: 6–8 inch, solid type</p> <p>Brakes: Push-to-lock manual brakes</p> <p>Footrests: Swing-away, detachable (optional but preferred)</p> <p>Seat &amp; Backrest: PVC or nylon upholstery; easy to clean and disinfect</p> <p>Design: Foldable, with reinforced cross-brace for stability</p> <p>Weight: Approximately 14–20 kg</p> <p>Safety Features: Stable frame, anti-tip design preferred, secure wheel locks, reinforced structure for hospital use.</p> <p>FOSHAN</p> <p>FOR THE USE OF VARIOUS DAVAO DE ORO PROVINCIAL HOSPITALS (MEDICAL APPARATUS) 4TH QUARTER</p> <p>THE AWARD IS BASED ON ABSTRACT NO. 2512068 UNDER REQUEST FOR QUOTATION NO.11-25-1832 OPENED ON December 05, 2025</p>		



Total Amount in Words: Eight Hundred Twenty Thousand Five Hundred Fifty Three Pesos and Sixty Five Cents Only	820,553.65
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