

PHILIPPINE NATIC. AL OIL COMPANY

PNOC Building VI, Energy Center, Rizal Drive, BGC, Taguig City TIN 000-169-191-000 VAT

PURCHASE ORDER

PY-716 (Rev. 09/88)

| SUPPLIER NAME AND ADDRESS SGS HEALTHCARE CO. | YOUR QUOTATION REFERENCE QUOTATION SUBMITTED BY: | PO Nº 298580 | | |
|--|---|-------------------------------|--|--|
| BRGY. SAN VICENTE, BACOLOR, PAMPANGA | MR. JAY T. GUARIN | REQUISITION NO. PSD-22-230 | | |
| | ABOVE PURCHASE ORDER AND REQUISITION NUMBERS | DATE PO PREPARED | | |
| PENER PROMETS, ENERGY CENTER RIZAL DRIVE, FORT BONIFACIO | MUST APPEAR ON ALL SHIPPING AND BILLING DOCUMENTS. THE COMMODITY CODES SHOWN BELOW MUST APPEAR ON | ACCOUNTING 24 A ROES | | |
| TAGUIG, M.M. ATTN: J.T. EVANGELISTA | ALL INVOICES AND SHIPPING LISTS, CAREFULLY READ AND FOLLOW ALL INSTRUCTIONS SHOWN AT THE BACK OF THIS PURCHASE ORDER. | DOLLAR CONVERSION/AMOUNT | | |

PAYMENT TERMS (UPON SUBMISSION OF ORIGINAL INVOICE & PO)

NET 30 DAYS

DETENTALAMEN

DELIVERY DATE NOT LATER THAN 30 CALENDAR DAYS UPON RECEIPT OF P.O.

ORIGIN

| ITEM NO. | COMMODITY | UM | DESCRIPTION | QUANTITY | UNIT PRICE | | AMOUNT |
|-------------|-----------|-----|--|------------|------------|----------|-----------|
| | | | SUPPLY AND DELIVERY OF COVID-1 | 9 | | | |
| | | | RESPONSE SUPPLIES | | | | |
| | | | FACE MASKS | | | | |
| all and | | bxs | | 682 | 54.00 | PhP = | 36,828.00 |
| | | | -Medical grade(FDA approved) | | | | |
| | | | -Disposable non-woven, 3 ply | | | | |
| | | | with ear loop, 50pcs/box | | | | |
| | | | -Fibergalss free, hypoallergenic, | | | | |
| | | | excellent breathability, adaptable | | | | |
| | | | to nose bar, high filtration | | | | |
| | | | lightweight | | | | |
| | | | -Shelf life: must be fresh commercial stock with a total shelf | | | | |
| | | | life of at least twenty-four (24) month | | | | |
| | | | from the date of manufacture but not | | | | |
| | | | less than eighteen (18) months from | | | | |
| | | | the date of delivery | | | | |
| | | | THE DOLL OF GENTLEY | | | | |
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| | | | NOTE: 12 % VAT II | VCLUDED II | F ANY | | |
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| | | | UPPLIER ACCEPTANCE | | PEVIEW AND | ABBBOVAL | |

SUPPLIER ACCEPTANCE

TERMS AND CONDITIONS ACCEPTED BY:

DATE ACCEPTED:

REVIEW AND APPROVAL

REVIEWED BY:

REVIEW AND APPROVAL

REVIEW