



PURCHASE ORDER

Supplier : **REDEMP MEDICAL SUPPLY**

Address : **BLOCK 15 LOT 29 ROSEVILLE SUBD..., ALFONSO ANGLIONGTO  
SR. BUHANGIN DISTRICT 8000 DAVAO CITY DAVAO DEL SUR  
PHILIPPINES**

TIN: **705-010-783**

PhilGEPS Registration No. : **379040**

Tel./Mobile/Fax No. : **09656476746**

Registration Certificate : **DTI**

P.O. Number: **2025051284**



**O202505128432FFBDE66**

Date : **Apr 30, 2025**

P.R. No. : **2025021126**

Procurement mode: **Competitive Bidding**

Req. Office : **PEEDO - DDN Hospital (Kapalong Zone)**

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

Date of Delivery : \_\_\_\_\_ Payment Term : **ON ACCOUNT**

Place of Delivery : **on site (DDNH-KZ)**

Delivery Term: **30 Working Days**  
**Partial delivery NOT ALLOWED**

I.N.	Quantity/Unit	Item	Unit Cost	Amount
1	3.00 UNIT	ECG MACHINE FEATURES 1. The weight of the machine should be 1 kg or less 2. LCD display should be full-touch operation 3. Can do one-button operation 4. The Common Mode Rejection Ratio should be up to 140dB restrains signal noises to the greatest extent, thus offers you traces with excellent quality 5. Bandwidth should range from 0.01 to 300 Hz guarantees the accuracy of the ECG signal as well as the interpretation especially for pediatric patients 6. Sampling rate should be as high as 16,000 Hz aims at capturing all the details to generate precise result 7. The signals should have different colors to indicate normal, poor or missing signals, and the function must help you to identify the signal quality even at a glance 8. Should be arm with at least one (1) USB port and one (1) microSD card slot, which extends its capability by supporting external devices like USB Memory Drive or microSD card	98,500.00	295,500.00

TECHNICAL SPECIFICATIONS:

For Davao del Norte Hospital-Kapalong Zone use.

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

I hereby conform that **NOTICE TO DELIVER** shall be served to the **PLACE OF DELIVERY** stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme :

(Signature over printed name)

**MAY 23 2025**

(Date)

Very truly yours,

**GALE GUADALUPE G. MORILLERO, MSIRG, MPH**  
Assistant Provincial Administrator (Administration)  
**EDWIN I. JUBAHIB**  
Governor

(Date)

NOTE: This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.

ALEJANDRO R. OMILA JR.



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English language to include delivery, installation,  
and testing.

**ZONCARE/K-EA3**

The award is based on Abstract No. **0420251050** created on **April 15, 2025** and resolved on  
**April 30, 2025** under Quotation No. **B20250999** opened on **April 15, 2025**

For Davao del Norte Hospital-Kapalong Zone use.

Grand Total Amount in Words : **TWO HUNDRED NINETY-FIVE THOUSAND FIVE  
HUNDRED AND XX / 100**

GRAND TOTAL : **₱ 295,500.00**

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Assistant Provincial Administrator (Administration)

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