PURCHASE REQUEST

Entity Name: Philippine Fiber Industry Development Authority Fund Cluster:

Office/Section:		PR No.: 18-07-412 Responsibility Center Code:			Date: <u>July 3, 2018</u>		
Stock/Property No.	Unit	Item Description	ı	Quantity	Unit Cost	Total Cost	
	pax	On-site Annual Physical Exa Medical Check-up	mination/	102	2,000.00	204,000.00	
		Physical Examinatio	n				
		Urinalysis					
		Chest X-ray				2	
		Complete Blood Cou	unt			18	
		➢ ECG			1	**	
		Drug Test					
		Blood Chemistry					
		→ Cholesterol					
		→ Random Blood S	ugar				
		→ Creatinine		· v			
		→ Blood Uric Acid					
					g Lorenza de Sala		
		DOH Accredited					
				F 1		10.3	
			7.4				
1.			A	a /satage			
					100		
Purpose: Fo	or Employe	ee's Annual Mandatory Medical OFFICE THE 18 NUR PERSONNET	Check-up			204,000.00	
Requested				Approved by:			
Signature		1 hax Dustoff					
Printed Name	ROSALINA P. LIZARDO			RAMON M. BRANZUELA			
Designation	Chief, AFMD		7 0	OIC- Deputy Executive Director			