PURCHASE ORDER

GENERAL SERVICES AGENCY
DEPARTMENT OF ADMINISTRATION
GOVERNMENT OF GUAM
148 Route 1
Marine Drive
Piti, Guam 96925

TRAN CODE

THIS PURCHASE ORDER NUMBER

No. P206E00211

MUST APPEAR ON ALL INVOICES PACKING SLIPS, PACKAGES, B/L, CORRESPONDENCE ETC.

F.O.B.	* AIR FREIGHT TEL. CONTACT	SHIP VIA:	DATE	JOB ORDER NO.	OBJCL
		PREPAID-SHOW SHIPPING CHARGES AS SEPARATE ITEM ON INVOICE.	4/14/2020	171320123240	240

VENDOR

TO:
MEDPHARM
P O BOX 11864
TAMUNING, GU 96931

Telephone: 671 632-6000 Fax: 671 632-9000
Email:

VENDOR M0096987

SHIP TO

CONSIGNEE, DESTINATION & MARKING
DEPT OF PUBLIC HEALTH
& SOCIAL SERVICES
123 CHALAN KARETA RTE. 10
MANGILAO, GU 96923-0000

CAFER PH CRISIS RESPONSE(2018)

AUTHORITY	** INVITATION NO.	** CONTRACT NO.	TIME FOR DELIVERY	EXPIRING	DISCOUNT TERMS:
3113			2-4 WEEKS		

ITEM	ARTICLES OF SERVICES	QTY.	UNIT	UNIT PRICE	AMOUNT	DOCUMENT NUMBER	FAC
1	NITRILE EXAM GLOVES (SIZE M) POWDER FREE 100/BOX	30	BX	5.000	150.00	Q201713177	

NOTE:
THE GOVERNMENT OF GUAM WILL NOT BE RESPONSIBLE FOR 'UNAUTHORIZED' PURCHASES OR SERVICES.
Note: Amounts due this Purchase Order may be off set for monies due the Government of Guam inclusive of but not limited to taxes, fees, and returned checks plus for other damages, penalties, and Attorney's fees, after failure to pay accordingly.
ALL LATE DELIVERIES AND ACCEPTANCES ARE SUBJECT TO THE LIQUIDATED DAMAGES CLAUSE IN SECTION 6101(9)(a) OF THE GAR.

SPECIAL INSTRUCTION S TO VENDOR:

B. SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION; GOVERNMENT OF GUAM, P.O. BOX 884, AGANA, GUAM 96910.
C. PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION.
D. THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE.
E. ** THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID.
F. * ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.

150.00

↑ TOTAL ↑

A. DO NOT FILL THIS ORDER IF YOUR TOTAL COST EXCEEDS THIS TOTAL.
INSERT CHANGES AND RETURN THIS ORDER FOR AMENDMENT.

CONTRACTOR: PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PURCHASE ORDER NUMBER SHOWN ABOVE. SEE REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.

ADVANCE PAYMENT AUTHORIZATION
PAYMENT ENCLOSED ☐

SIGNATURE: CAguilar

Claudia S. Acfalle (NAME) Chief Procurement Officer (TITLE)

Control No.

ORIGINAL/VENDOR'S COPY

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AUTHORITY	** INVITATION NO.	** CONTRACT NO.	TIME FOR DELIVERY	EXPIRING	DISCOUNT TERMS:
3113			2-4 WEEKS		

ITEM	ARTICLES OF SERVICES	QTY.	UNIT	UNIT PRICE	AMOUNT	DOCUMENT NUMBER	FAC

THIS ORDER IS SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS:

1. Acknowledgment copy of this order must be signed and returned advising approximate or definite shipping date.

2. No variation in any of the terms, conditions, deliveries, prices, quantity, quality, or specification on this order, irrespective of the wording of the seller's acceptance, will be effective without buyer's written consent.

3. Packing list must accompany each shipment, showing our order number, description and part/serial number for each item.

4. Shipments must be identified as "PARTIAL" or "COMPLETE".

5. Material is subject to buyer's inspection and approval within a reasonable time after delivery; if specifications are not met, material shall be returned at seller's expense.

6. In connection with any prompt payment discount offered, time will be computed from date of delivery and acceptance at destination, or from the date the correct invoice or voucher is received in the office specified by the Government of Guam, if the latter is later than date of delivery and acceptance. Payment is deemed to be made, for the purpose of earning discount, on the date of the mailing of the check.

7. Overshipments, unless specifically authorized, will not be accepted.

8. In connection with bid awards and contracts, this purchase order shall be governed by the Special Provisions and Bid General Terms and Conditions as specified.

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ADVANCE PAYMENT AUTHORIZATION
PAYMENT ENCLOSED ☐

SIGNATURE: CAyalle

Claudia S. Acfalle NAME Chief Procurement Officer TITLE

Control No.

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* * * * * * * * * * * * * * * * * * * * * *
*        V E N D O R   A C K N O W L E D G M E N T
*
*  RETURN TO SUPPLY MANAGEMENT DIVISION
*
*  DATE OF RECEIPT OF THIS ORDER  ______________
*
*  SIGNATURE  ______________________________
*
* * * * * * * * * * * * * * * * * * * * * *

* * * * * * * * * * * * * * * * * * * * * *
*        R E C E I V I N G   R E P O R T   C O P Y
*
*  I CERTIFY THE ABOVE ARTICLES AND/OR SERVICES HAVE/HAS BEEN
*  RECEIVED AND/OR RENDERED AND THE SAME HAS BEEN INSPECTED
*  AND ACCEPTED EXCEPT AS OTHERWISE NOTED HEREIN.
*
*
*  DATE RECEIVED: __________  SIGNATURE: ______________
*
* * * * * * * * * * * * * * * * * * * * * *
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PAYMENT ENCLOSED ☐

SIGNATURE: CAyalle

Claudia S. Acfalle (NAME) Chief Procurement Officer (TITLE)

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