



REV. 8/99

PO No: 0076LDRHPO2200084

			LOCAL PURCH	ASE ORDER		12	
Date: TO: Payee's TIN: Payee's Address Region:	AND STATIONERY	ATIONERY COMPAN FROM Payer Payer Regio		SOKOINE R 0076LDRH LINDI	EGIONAL REFERRA	ONAL REFERRAL HOSPITAL	
	ds/ Services Detailed	below:					
. :TOFALI 6 II		Each	QTY	UNIT P	RICE	VAT	TOTAL AMOUNT
. The Purchase Ord	y:	uoted on all comm	nunications relev	ant to this order e.		Expected Date for	delivery: 25 Feb 2022
repared By: BER	RTHA ALFRED CHITAND	Aa .	CALOFFIC	Et	Approved I	NO.	VAHA MASSAWE
	Hlusmus	-U.	SOKOIN SOKOIN	INDI BOX 101			

Official Seal

**Supplier Representative**