

REQUISICAO DE EMPENHO

REQUISICAO DE EMPENHO (R.E.): 01530/15 DATA da R.E.: 06/08/2015

UNIDADE.....: 0205 - SECRETARIA MUNICIPAL DE SAUDE
 BLOQUEIO ORCAMENT.: INEXISTENTE

FAVORECIDO.....: MULT FARMA LTDA - EPP COD.: 3885
 Endereco.: RUA PEDRO CALDAS REBELLO, N. 195
 Bairro...: SANTO DOROTEIA Cidade: POUSO ALEGRE
 UF.....: MG CEP :37550-000 Fone: (35) 3449-9975
 CPF/CNPJ..: 16.586.871/0001-79
 Pagamento: Banco: Agencia: Conta:

ORDEM SERVICO (OS): 39731 ITEM DA O.S.: 1
 CONTRATO..... : 08 VIGENCIA: 03/02/2015 a 02/02/2016

PROCESSO DE COMPRA: PRC00155/15 (COMPRA POR REGISTRO DE PRECOS) HOMOLOGADO em 06/08/2015
 REGISTRO DE PRECOS: PRC00002/15 LICITACAO: PREG0003/15 PREGAO
 FUNDAMENTACAO LEGAL:

CONDICAO PAGAMENTO: CONFORME EDITAL
 PRAZO DE ENTREGA..: 1 dia(s)
 FICHA: 158 CLAS. ORCAMENTARIA: 0205 1030310032.163 339032 - Material, Bem ou Servico de Distrib. Gratuita
 FONTE.....: SAUDE - GASTOS COM SAUDE - 15%
 PROJETO/ATIVIDADE.: 2.163 - MANUTENCAO ASSISTENCIA FARMACEUTICA-REC.PROP.

VALOR TOTAL DA RE.: 22.866,12

H I S T O R I C O : AQUISICAO DE MEDICAMENTOS ETICOS NAO BASICOS PARA DISTRIBUICAO GRATUITA AOS MUNICIPIES CARENTES, REFE
 RENTE AO MES DE JULHO DE 2015, CONFORME PARECER.

RELACAO DOS PRODUTOS DESTA REQUISICAO DE EMPENHO

DESCRICAO PRODUTO	UN CODIGO	QUANTIDADE	PRECO UNITARIO	VALOR TOTAL
1-ALENIA 12+400MCG	FR 124737	1,0000	68,9620	68,96
1-SPIRIVA RESPIMAT 2,5MCG	FR 124760	3,0000	223,5755	670,72
1-VESICARE 10MG C/ 30 COMP.	CX 124765	4,0000	123,8445	495,37
1-BENICAR HCT 40+12,5MG C/ 30	CX 124856	1,0000	40,8537	40,85
1-CLEXANE SAFETY LOCK 40MG	CX 124859	6,0000	76,1902	457,14
1-LANTUS 100UI/ML C/ 10ML	FR 124876	4,0000	262,4935	1.049,97
1-MONOCORDIL RETARD 50MG C/ 30	CX 124880	3,0000	9,9180	29,75
1-NIAR 5MG C/ 30 COMP.	CX 124883	4,0000	46,7335	186,93
1-ONBRIZE 300MCG C/ 30 CPS+INL	CX 124886	3,0000	85,4992	256,49
1-RETEMIC 5MG C/ 30 COMP.	CX 124892	3,0000	19,9012	59,70
1-REUQUINOL 400MG C/ 30 COMP.	CX 124893	1,0000	51,5837	51,58
1-SERETIDE DISKUS 50+250MCG	FR 124896	2,0000	77,7707	155,54
1-SUSTRATE 10MG C/ 50 COMP.	CX 124899	3,0000	16,9432	50,82

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1-XARELTO 15MG C/ 14 COMP.	CX	124903	2,0000	84,2160	168,43
1-ARTROLIVE 1500+1200MG	CX	125035	13,0000	102,0292	1.326,37
1-AZOPT 1% C/ 5ML	FR	125037	1,0000	45,3197	45,31
1-GALVUS MET 50+850MG C/ 56 CP	CX	125048	3,0000	146,5152	439,54
1-LECTRUM 7,5MG	CX	125051	2,0000	1.176,8707	2.353,74
1-SERETIDE 25+125MCG/DOSE	FR	125061	1,0000	74,0732	74,07
1-TRAYENTA 5MG C/ 30 COMP.	CX	125066	6,0000	142,4190	854,51
1-ARTRODAR 50MG C/ 30 DRGS.	CX	125142	5,0000	102,8340	514,17
1-MILGAMMA 150MG C/ 30 DRGS.	CX	125151	6,0000	41,4990	248,99
1-PROLIA 60MG	CX	125153	6,0000	606,7162	3.640,29
1-CALTREN 10MG C/ 30 COMP.	CX	125201	4,0000	34,2562	137,02
1-FLUIR 12MCG C/ 30 CPS + INAL	CX	125353	1,0000	33,0600	33,06
1-AVICIS 0,25MG/ML C/ 100ML+AP	FR	125446	1,0000	102,5150	102,51
1-OXIMAX 400MCG C/ 30 CPS+INAL	CX	125458	2,0000	38,5845	77,16
1-TRAYENTA DUO 2,5MG+1000MG	CX	125461	3,0000	140,2440	420,73
1-XARELTO 20MG C/ 28 COMP.	CX	125463	1,0000	178,0382	178,03
1-LYRICA 75MG C/ 28 CPS.	CX	125552	4,0000	85,1295	340,51
1-DAFLON 500MG C/ 30 COMP.	CX	125683	6,0000	53,8747	323,24
1-ELIQUIS 2,5MG C/ 6 X 10 BL	CX	126481	8,0000	178,8067	1.430,45
1-SUPRELLE 1MG + 0,5MG	CX	126485	1,0000	53,2222	53,22
1-FLIXOTIDE DISKUS 250MCGX60DS	CX	126553	2,0000	65,4675	130,93
1-MANTIDAN (C1) C/ 20 CPR	CX	126556	8,0000	10,6285	85,02
1-PROLOPA HBS 125MG C/ 30 CPS	CX	126558	2,0000	41,9122	83,82
1-XALATAN SOL OFTA C/ 2,5ML	FR	126560	1,0000	102,6890	102,68
1-BAMB AIR 1,0MG/ML C/ 120ML +	FR	126633	1,0000	25,6070	25,60
1-BENICAR 40MG C/ 30 COMP.	CX	126635	2,0000	34,1910	68,38
1-DIAMICRON MR 30MG C/ 30COMP.	CX	126641	1,0000	21,5760	21,57
1-SERETIDE DISKUS 50+500MCG	FR	126653	2,0000	127,0925	254,18
1-SOMALGIN CARDIO 81MG C/ 32	CX	126654	2,0000	7,1267	14,25
1-TICLID C/ 20 DRG	CX	126656	2,0000	44,0800	88,16
1-ADALAT 20 MG C/ 30 COMP.	CX	126786	1,0000	25,0415	25,04
1-DEPAKOTE ER (C1) 500MG C/30	CX	126790	2,0000	61,0087	122,01
1-HIDRION C/ 20 COMPR.	CL	126793	2,0000	11,8827	23,76
1-ONBRIZE 150MCG C/ 30 CPS+INL	CX	126795	2,0000	85,4992	170,99
1-RETEMIC 5MG C/ 60 COMP.	CX	126796	4,0000	33,0600	132,24
1-SUCRAFILM 2GR C/ 10ML	FR	126800	2,0000	51,8447	103,68
1-ADDERA D3 50.000UI C4 CP	CL	127048	2,0000	81,6567	163,31
1-AROVIT 50000 UI C/ 30DRG	CX	127049	1,0000	4,8285	4,82
1-BENEROC COMPLEX C/ 50 DRG	CX	127050	2,0000	12,9050	25,81
1-BUSONID AQUOSO NASAL 50MCG	FR	127051	1,0000	19,5460	19,54
1-CAPILAREMA 75MG C/ 60 COMP.	CX	127052	1,0000	48,3357	48,33
1-CITALOR 40MG C/ 30 COMP. REV	CX	127053	4,0000	122,9237	491,69
1-COMBODART 0,5+0,4MG C/30 CPR	CX	127054	2,0000	70,6947	141,38
1-DAFLON 1000MG C/ 30 COMP.	CX	127055	1,0000	103,5300	103,53
1-DIAMICRON MR 60MG C/ 30 CPR	CX	127056	1,0000	43,1157	43,11
1-DINAFLEX 1,5GR C/ 30 SACHES	CX	127057	1,0000	129,1152	129,11
1-DIOVAN HCT 320/25MG C/ 28CPR	CX	127058	1,0000	100,9635	100,96
1-DORMONID (B1) 15MG C/20CPR	CX	127059	2,0000	42,0645	84,12
1-DUO TRAVATAN BAK-FREE C/ 5ML	FR	127060	1,0000	161,3705	161,37
1-DUOVENT N 0,02/50+0,05/50ML	CX	127061	1,0000	10,4255	10,42
1-ELIQUIS 5MG C/ 6X10 BL	CX	127062	1,0000	180,2567	180,25

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1-FLUIR 12MCG C/60 CPS REFIL	CX 127063	1,0000	42,2820	42,28
1-GINKOBA 120MG C/ 30 COMP.	CX 127064	3,0000	40,3390	121,01
1-LIORESAL 10MG C/ 20 COMP.	CX 127065	7,0000	25,8027	180,61
1-MAGNEN B6 C/ 30 CPR REV	CX 127066	1,0000	44,7035	44,70
1-MAXSULID 400MG X 10	CX 127067	1,0000	21,7935	21,79
1-MERITOR 2+1000MG X 30CPR REV	CX 127068	3,0000	37,4462	112,33
1-MERITOR 4+1000MG X 30CPR REV	CX 127069	1,0000	51,4532	51,45
1-MESACOL 250MG C/ 10	CX 127070	6,0000	23,0115	138,06
1-NEUTROFER FOLICO 150MG C/ 30	CX 127071	1,0000	21,0105	21,01
1-ONGLYZA 5MG C/ 2BL X 14	CX 127072	2,0000	71,7750	143,55
1-PANTOZOL 40MG C/ 28 CPR	CX 127073	3,0000	179,6985	539,09
1-PRADAXA 110MG C/ 30 COMP.	CX 127074	2,0000	90,2262	180,45
1-SECOTEX 0,4MG C/ 30CPR REV	CX 127075	2,0000	85,1440	170,28
1-SECOTEX 0,4MG C/ 30 SACHES	CX 127076	1,0000	128,6440	128,64
1-SECOTEX 0,4MG C/ 20 CPR REV	CX 127077	4,0000	87,4785	349,91
1-STUGERON 25MG C/ 30 COMP.	CX 127078	2,0000	12,0060	24,01
1-TECNOMET 2,5MG C/ 20 COMP.	CX 127079	2,0000	17,6465	35,29
1-TYLENOL SINUS 500MG C/ 24CPR	CX 127080	1,0000	10,3385	10,33
1-TYLEX (A2) 7,5MG C/ 12 COMP.	CX 127081	8,0000	14,1012	112,80
1-ARTROLIVE CT X 30 COMP.	CX 127082	3,0000	54,0342	162,10
1-COSOP C/ 5ML	CX 127083	2,0000	78,2420	156,48
1-HUMALOG MIX 25 5 REFIS C/3ML	CX 127084	1,0000	175,2977	175,29
1-OSTEOGLIC 1,5GR C/ 30 SACHES	CX 127085	3,0000	97,7952	293,38
1-PIOGLIT 15MG C/ 30 COMP.	CX 127086	2,0000	38,8962	77,79
1-TYLEX (A2) 30MG C/ 12 COMP.	CX 127087	1,0000	19,4082	19,40
1-HIDRION 2BL C/ 15 COMP.	CX 127088	1,0000	17,0302	17,03
1-NORIPURUM INJ EV C/ 5 X 5ML	CX 127089	1,0000	41,8397	41,83

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E M P E N H O (TIPO/NUMERO):

Valor Total a Empenhar(*): R\$ 22.866,12

VALOR TOTAL POR EXTENSO:(vinte e dois mil, oitocentos e sessenta e seis reais e doze centavos***

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(*) Valor modificavel a criterio do usuario

MAURILIO ANTONIO PEREIRA
SETOR DE COMPRAS