



Republic of the Philippines
PROVINCE OF ISABELA
PURCHASE ORDER

Supplier: GCMed Pharmaceutical Distributor

P.O. No.: 21-09-0210

Address: Lot 2 Blk 19 Villa Christine Royale, San Miguel Pasig City

Date: 09-30-21

Gentlemen:

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

Place of Delivery: PGSO

Delivery Term: CHARGE

Date of Delivery: Seven (7) days after receipt of P.O.

Payment Term: CHECK

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	boxes	198	Multivitamins Tablet, 24's	660.00	Php 130,680.00
<div>PROVINCE OF ISABELA REVENUE & GENERAL SERVICES OFFICE BY: <u>ALBANO</u> DATE: <u>9-30-21</u></div>					
Total Amount			One Hundred Thirty Thousand Six Hundred Eighty Pesos		Php 130,680.00

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.

Very truly yours,

Conforme:

for Chtia
GCMed Pharmaceutical Distributor

Signature over printed Name

10-14-21

(Date)

RODOLFO T. ALBANO III
Provincial Governor

In case of negotiated purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished).

Approved per Sanggunian Resolution No.: _____

Certified Correct: _____

Date: _____

FEDERAL RESERVE