Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

Supplier	GCMED Pharmaceutical Distributor	P.O. No.:	21-09-H0109A
Address	San Miguel, Pasig City	Date:	September 15, 2021

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	bxs	2	HbsAg, 96 test, ELISA, Inteq	50,000.00	100,000.00
2	bxs	2	HCV, 96 Tests, ELISA, Inteq	50,000.00	100,000.00
3	bxs	2	HIV 1 & 2, 96 Tests, ELISA, Inteq	50,000.00	100,000.00
4	bxs	2	Syphillis, Elisa 96 Tests, ELISA, Inteq	50,000.00	100,000.00
Total Amount in Words:			*Four Hundred Thousand Pesos*		400,000.00

PROVINCIAL GENERAL SERVICES
BY Ann
DATE 2-15-21

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,

RODOLFO T. ALBANO III
Provincial Governor

Conforme:

For: Chita
GCMED Pharmaceutical Distributor
(Signature over printed name)

10-14-21
(Date)

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:* _____

GENERAL FUND