



Republic of the Philippines
 PROVINCE OF ISABELA
PURCHASE ORDER

P.A. NO. 2930
 DATE 12/20/21
 BY: [Signature]

Supplier : Gcmed Pharmaceutical Distributor

P.O. No. : 21-12-00121

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

Date : December 21, 2021

Gentlemen:

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

Place of Delivery : PGSO

Delivery Term:

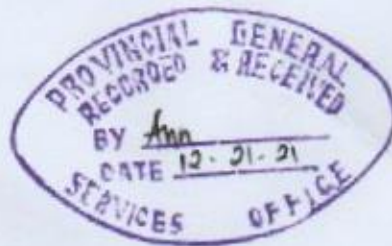
Charge

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

Payment Term:

Check

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	bottle	300	Ascorbic Acid 100mg/5ml syrup, 60ml	53.99	16,197.00
2	bottle	100	Ascorbic Acid 100mg/ml drops, 15ml	49.48	4,948.00
3	bottle	100	Zinc Sulfate 27.5mg/ml drops, 15ml	104.47	10,447.00
4	bottle	300	Zinc Sulfate 55mg/ml syrup, 60ml	36.60	10,980.00
5	bottle	100	Butamirate Citrate 7.5mg/5ml, 120ml syrup	144.95	14,495.00
6	bottle	100	Cefixime 100mg/5ml, 60ml suspension	509.98	50,998.00
7	bottle	100	Cefixime 20mg/ml 15ml oral drops	411.60	41,160.00
8	bottle	100	Cetirizine 2.5mg/ml, 15ml drops	118.98	11,898.00
9	bottle	300	Cetirizine 5mg/5ml syrup, 60ml	239.98	71,994.00
10	bottle	100	Lactulose 3.33g/5ml syrup	418.00	41,800.00
11	bottle	100	Paracetamol 100mg/drops 15ml	49.00	4,900.00
12	bottle	300	Paracetamol 250mg/ml suspension, 60ml	84.99	25,497.00



Total Amount

Three Hundred Five Thousand Three Hundred Fourteen Pesos 00/100

Php

305,314.00

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:

[Signature]
 Gcmed Pharmaceutical Distributor

Signature over printed Name

12-27-21

(Date)

[Signature]
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.: