

P.O. No.

P.A. NO: 2297  
D: 10-  
B: 10-



Republic of the Philippines  
PROVINCE OF ISABELA  
**PURCHASE ORDER**

Supplier : Gcmed Pharmaceutical Distributor  
Address : Lot 2 Blk 19, Villa Christine Royalle, San Miguel, Pasig City

P.O. No. : 21-10 -D0059  
Date : October 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	vial	1000	Ceftriaxone 1g vial	379.99	379,990.00
2	vial	300	Piperacillin + Tazobactam 4.5g vial	971.99	291,597.00
3	vial	50	Sodium Bicarbonate 84mg/ml 50ml	91.65	4,582.50
4	vial	100	Potassium Chloride 2 mEq vial	40.00	4,000.00
5	nebule	600	Ipratropium + Salbutamol Nebule	34.50	20,700.00
6	bottle	360	Sterile Water 50ml	33.00	11,880.00
7	sachet	500	Acetylcysteine 600mg effervescent tablet	35.95	17,975.00
8	tablet	1000	Cefuroxime 500mg tablet	43.48	43,480.00
9	tablet	1000	Cetirizine 10mg tablet	9.87	9,870.00
10	ampule	100	Clindamicin ampule 150mg/ml	297.99	29,799.00
11	bottle	300	Metronidazole 100mg bottle	61.91	18,573.00
12	bottle	100	Ciprofloxacin 2mg/ml bottle 100ml. Vial	294.99	29,499.00
13	tablet	1000	Butamirate Citrate 50mg tablet	15.95	15,950.00
14	tablet	300	Gliclazide 80mg tablet	5.54	1,662.00
15	bottle	50	Lactulose syrup	418.00	20,900.00
16	ampule	200	Tranexaminic Acid ampule	97.98	19,596.00

PROVINCE OF ISABELA  
OFFICE OF THE PROVINCIAL GOVERNOR  
San Miguel, Pasig City  
Am  
10-15-21

Total Amount Nine Hundred Twenty Thousand Fifty Three Pesos 50/100 Php 920,053.50

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 Chella  
Gcmed Pharmaceutical Distributor  
Signature over printed Name  
12-27-21  
(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