

Republic of the Philippines PROVINCE OF ISABELA

PURCHASE ORDER

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**	Gamad Pharmacoutical	DI LIL L					

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

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DATE:	Λ		
BY:		/	
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BY:		/	
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P.O. No.: 22-09-00089	P.O.	No.	:	22-19	-	0089
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Date: September 19, 2022

Gentlemen:	Please furnish this office the following articles subject to the terms and conditions contained herein:	
Please furnis	sh this office the following articles subject to th	e terms and conditions contained herein:
Place of Delivery :	PGSO - Manuel L. Roser Mitriet Howard	Delivery Term:

Charge

Date of Delivery: seven (7) days after receipt of P.C.		days after receipt of P.O. Payment Term:	Check			
Item No.	Unit	Quantity	Description	Unit Cost	Aı	mount
1 2 3 4 5 6 7 8	unit ampule ampule vial vial ampule	200 30 300 300 200 212 300 10	Potassium Chloride amp Sodium Bicarbonate 1mEq/ML Diphenhydramine 50mg/ml Metronidazole 5mg/ml Cloxacillin 500mg vial Ranitidine 25mg/ml amp Paracetamol 150mg/ml amp Verapamil 2.5mg/ml	48.00 109.98 79.19 56.99 309.98 31.00 14.78 157.98	Ai	9,600.00 3,299.40 23,757.00 17,097.00 61,996.00 4,434.00 1,579.80
Total A	mount	One	Hundred Twenty Eight Thousand Three Hundred Thirty Five Pes	os & 20/100	Php	128,335.20

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:

Gemed Pharmaceutical Distributor

Signature over printed Name

1|-14-22 (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:

Provincial Governor