



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

Supplier : Gcmed Pharmaceutical Distributor

P.O. No. : 22-06-D0053-A

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

Date : June 14, 2022

Gentlemen:

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

Place of Delivery : PGSO

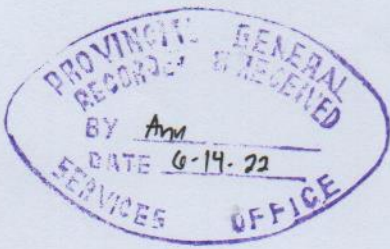

Delivery Term:

Charge

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

Payment Term:

Check

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	amp	300	Tranexamic Acid 100mg/ml 5ml ampule	194.98	58,494.00
2	amp	100	Lidocaine HCL Epinephrine 20mg/ml 2%	28.98	2,898.00
3	vial	200	Omeprazole 40mg Powder vial + 10ml Solvent amp	334.98	66,996.00
4	amp	300	Ranitidine 25mg/ml 2ml ampule	32.97	9,891.00
5	amp	400	Furosemide 10mg/ml 2ml ampule	19.99	7,996.00
6	cap	200	Tranexamic Acid 500mg capsule	14.98	2,996.00
7	cap	2000	Cefalexin 500mg Capsule	8.94	17,880.00
8	cap	200	Ketoanalogue Essential Amino Acid Capsule	52.99	10,598.00
9	cap	200	Omeprazole 20mg Capsule	11.98	2,396.00
					
					

**Total Amount**

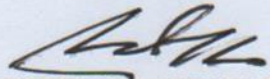
**One Hundred Eighty Thousand One Hundred Forty Five Pesos 00/100**

**Php**

**180,145.00**

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,

  
**RODOLFO T. ALBANO III**  
 Provincial Governor

Conforme:

  
 Gcmed Pharmaceutical Distributor

Signature over printed Name

8-10-22

(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: \_\_\_\_\_