Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

ier : *Gcmed Pharmaceutical Distributor*

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

P.O. No. : 22-08-D0074-A

Date : August 25, 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	1000	Ranitidine 25mg/ml, 2ml amp	32.97	32,970.00
2	vial	500	Omeprazole 40mg vial	334.98	167,490.00
Total Amount			***Two Hundred Thousand Four Hundred Sixty Pesos 00/100***	**Php**	**200,460.00**

BUDGET FACILITY BY An DATE 8-25-22 SERVICES OFFICE

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

12-22-22
(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: _____