



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

P.A. No. 1770  
 DATE: 8/20/22  
 BY: [Signature]

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

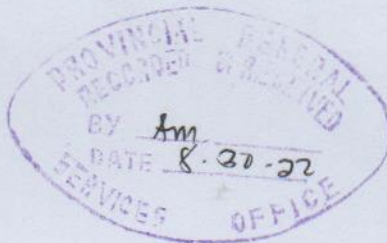
P.O. No. : 22-04-MD105  
 Date : August 30, 2022

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	packs	4/	Electrolytes Reagent	-	-
2	boxes	2/	HbA1c Quantitative Kit (Finecare)	10,781.00	21,562.00
3	boxes	2/	TSH Rapid Quantitative Test Kit (Finecare)	13,179.00	26,358.00
4	boxes	2/	Dengue NS1 Antigen Rapid Test Cassette	11,040.00	22,080.00
5	boxes	3/	Hematology Reagent Gepp320++ (20liters)	22,500.00	67,500.00
6	box	1/	Chemistry Analyzer Normal	45,000.00	45,000.00
7	box	1/	Chemistry Analyzer Pathologic Control (GA200)	45,000.00	45,000.00
8	bottles	2/	Deproteinizer ISE Electrolyte	9,000.00	18,000.00
9	trays	10/	Blood Collecting Tube (Microtainer)	1,320.00	13,200.00



GENERAL FUND

**Total Amount** Two Hundred Fifty Eight Thousand Seven Hundred Pesos 00/100 **Php** 258,700.00

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  
10-24-22  
 (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.: \_\_\_\_\_

Certified Correct: \_\_\_\_\_

Date: \_\_\_\_\_