



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

P.A. No. 9/20/22  
 Dr. 8  
 B. 8

Supplier : Gmed Pharmaceutical Distributor

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

P.O. No. : 22-09-MO119

Date : September 20, 2022

Gentlemen:

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

Place of Delivery : PGSO

Delivery Term: \_\_\_\_\_

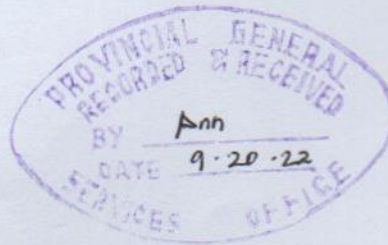
Charge \_\_\_\_\_

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

Payment Term: \_\_\_\_\_


Check \_\_\_\_\_

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	gal	8	Activated Glutaraldehyde Sol'n, w/ Activator	2,939.95	23,519.60
2	bxs	60	Examination Gloves M, 100's	994.89	59,693.40
3	bxs	60	Examination Gloves L, 100's	994.89	59,693.40
4	unit	1000	OR gown, Disposable	169.90	169,900.00
5	packs	20	Shoe Cover, 100's	539.45	10,789.00
6	pcs	400	I.V. Cannula ga. 18, B-BRAUN	46.40	18,560.00
7	pcs	400	I.V. Cannula ga. 26, B-BRAUN	48.90	19,560.00
<b>Total Amount</b>			<i>Three Hundred Sixty One Thousand Seven Hundred Fifteen Pesos &amp; 40/100</i>	<b>Php</b>	<b>361,715.40</b>



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:

Gmed Pharmaceutical Distributor

Signature over printed Name

10-27-22  
 (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: \_\_\_\_\_