P.A No.: 2355
DATE:
BY:

Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

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

P.O. No. : 22-09-40127
Date : September 28, 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	box	1	HDL-Direct (Cholesterol) 50ml x 3's / 17ml x 3's	93,900.00	93,900.00
2	box	1	Uric Acid (BUA), 70ml x 4's / 20ml x 3's	91,530.00	91,530.00
3	box	1	Urea UV (BUN), 70ml x 4's / 30ml x 3's	102,830.00	102,830.00
4	box	1	Creatinine, 70ml x 4's / 20ml x 3's	101,700.00	101,700.00
5	box	1	SGOT/AST, 70ml x 4's / 20ml x 3's	124,300.00	124,300.00
6	box	1	SGPT/ALT, 70ml x 4's / 20ml x 3's	124,300.00	124,300.00
7	bot	1	A1 Flush (Alkaflush) 1000ml	29,850.00	29,850.00
8	box	1	Dutch Cal M, 3ml x 6's (Multicalibrator)	31,000.00	31,000.00
9	bot	1	LISS	1,500.00	1,500.00
10	bot	1	Anti Human Globulin (AHG)	1,437.50	1,437.50
11	box	1	HCG Pregnancy Test x 50's	1,160.00	1,160.00
12	box	12	Blood Glucose Strips	2,900.00	34,800.00
13	box	1	PSA FIA x 25's	16,387.00	16,387.00
14	box	1	FT4 FIA x 25's	10,787.00	10,787.00
15	box	1	HBA1C FIA x 25's	10,781.00	10,781.00
16	box	1	T3 FIA x 25's	10,350.00	10,350.00
17	box	1	T4 FIA x 25's	10,350.00	10,350.00
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Total Amount			***Seven Hundred Ninety Six Thousand Nine Hundred Sixty Two Pesos & 50/100***		**Php 796,962.50**

PROVINCIAL TREASURY OFFICE RECORDED & RECEIVED BY: DATE: 9-28-22 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

10-5-22
(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: _____

GENERAL SUPPL