

## Republic of the Philippines PROVINCE OF ISABELA

## **PURCHASE ORDER**

upplier: Gcmed Pharmaceutical Distributor

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

P.O. No.: 22-10-40154

Date: October 27, 2022

Ge	ntle	emer	1

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

Charge Delivery Term:

Place of Delivery: PGSO Check Payment Term:

Place of De	livery:	PGSO	Language of P.O. Payment Term	: 0	heck
Date of Deli		seven (7)	aays ufter receipt of 1.0.	Unit Cost	Amount
	Unit	Quantity	Description	- Care Gara	
1 2 3 4 5 5	bxs bxs bxs bxs bxs	120 120 100 10 100	Surgical Gloves 7.0, Sterile 50's Surgical Gloves 7.5, Steril 50's Disposable Syringe 10ml with needle x 10's Applicator Stick x 1000's Glass Slides, clear, 72's	1,897.50 1,897.50 568.48 254.57 90.00	227,700.00 227,700.00 56,848.00 2,545.70 9,000.00
Total	l Amoun	t Five	e Hundred Twenty Three Thousand Seven Hundred Ninety T	a penalty of one-tenth (1/1	0) of one

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:	Gemed Pharmaceutical Distributor	
	Signature over printed Name	
	(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: \_