

Republic of the Philippines PROVINCE OF ISABELA

PURCHASE ORDER

pplier: Gcmed Pharmaceutical Distributor

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

P.O. No.: 22 12 DO145 A

DATE:

Charge

Date: December 5, 2022

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

Place of Delivery: PGSO **Delivery Term:**

Date of De	Date of Delivery: seven (7) days after receipt of P.O. Payment Term:			<u> </u>	Check	
Item No.	Unit	Quantity	Description	Unit Cost	Amount	
1	vial	2000	Ceftriaxone 1g + 10ml diluent vial	178.00	356,000.00	
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			Ann 12.5.22		- - -	
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Total A	Total Amount		Three Hundred Fifty Six Thousand Pesos 00/100		Php 356,000.00	

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,

RODOLFO T. ALBANO III Provincial Governor

Conforme:

Gcmed Pharmaceutical Distributor

Signature over printed Name

2-19.22

(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: ___

GENEDA