P.A. NO: 2591
DATE:
BY:

Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

med Pharmaceutical Distributor

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

P.O. No. : 22-12-00149R

Date : December 5, 2022

entlemen:

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	ampule	30	Dopamine 40mg/ml, 5ml ampule	88.98	2,669.40
2	vial	100	Lidocaine 2% 50ml vial (Local Anesthesia) vial	54.98	5,498.00
3	vial	1500	Omeprazole 40mg powder vial + 10ml solvent ampule	333.00	499,500.00
4	vial	300	Piperacillin + Tazobactam 4g + 500mg vial	349.99	104,997.00
5	nebule	900	Salbutamol 2mg/ml, 2.5ml (unit dose) nebule	18.00	16,200.00
6	vial	30	Sodium Chloride 2.5mEq/ml, 20ml vial	51.98	1,559.40
7	ampule	100	Tranexamic Acid 100mg/ml, 5ml ampule	193.00	19,300.00
Total Amount			***Six Hundred Forty Nine Thousand Seven Hundred Twenty Three Pesos & 80/100***		**Php 649,723.80**

PROVINCIAL GENERAL SERVICES OFFICE RECORDED & RECEIVED BY Ann DATE 12-5-22

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

12-14-22
(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: _____