



Republic of the Philippines
 PROVINCE OF ISABELA
PURCHASE ORDER

P.A. NO: 2795
 DATE: _____
 BY: _____

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

P.O. No.: 2012-00178
 Date: December 15, 2012

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	amp	1000	Omeprazole 40mg powder vial + 10ml solvent ampule	333.00	333,000.00



Total Amount Three Hundred Thirty Three Thousand Pesos 00/100 Php 333,000.00

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:

Chilla
 Gcmed Pharmaceutical Distributor

Signature over printed Name

12-23-12
 (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: _____