P.A No.: 2957
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. : 22-12-m0195
Date : December 5, 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	bxs	5	HbA1C FIA x 25's	10,781.00	53,905.00
2	bxs	2	TROP I / CKMB MYO (3 IN 1) FIA X 25's	34,327.50	68,655.00
3	bxs	2	TSH FIA X 25's	13,179.00	26,358.00
4	bxs	2	FT3 FIA X 25'S	10,787.00	21,574.00
5	bxs	2	FT4 FIA X 25'S	10,787.00	21,574.00
6	bx	1	CRP FIA X 25'S	12,604.00	12,604.00
7	bx	1	PSA FIA X 25'S	16,387.00	16,387.00
Total Amount			***Two Hundred Twenty One Thousand Fifty Seven Pesos 00/100***		**Php 221,057.00**

PROVINCIAL GENERAL SERVICES OFFICE RECORDED & RELEASED BY Am 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

12·22·22
(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: _____