



Republic of the Philippines
 PROVINCE OF ISABELA
PURCHASE ORDER

P.A. NO: 959
 DATE: _____
 BY: _____

Supplier : Gcmed Pharmaceutical Distributor
 Address : Mansion Condominium, 212 San Juan St., Brgy. 037, District 02, Pasay City

P.O. No. : 23-05 - H0030
 Date : May 9, 2023

Gentlemen:

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

Place of Delivery : PGSO - STADIUM STPS 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	pcs	20	Cautery Pencil	1,360.00	27,200.00
2	pcs	20	Cautery Pad	980.00	19,600.00
3	gal	8	Povidone 10%	1,338.00	10,704.00
4	gal	8	Povidone 7.5	1,371.75	10,974.00
5	pcs	150	Isolation Gown	169.00	25,350.00
6	pcs	100	Face Shield	37.00	3,700.00
7	packs	5	Shoe Cover	539.40	2,697.00
8	pcs	200	Blood Transfusion Set	74.00	14,800.00
9	pcs	100	Foley Catheter Fr8	69.80	6,980.00
10	pcs	200	Heplock	23.90	4,780.00
11	pcs	200	02 Cannula Adult	52.00	10,400.00
12	pcs	200	Suction Catheter Fr8	15.00	3,000.00



Total Amount One Hundred Forty Thousand One Hundred Eighty Five Pesos & 00/100 **Php** 140,185.00

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
07-03-23
 (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: _____