



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

P.A. NO: 1579
DATE: _____
BY: CA

Supplier: Gcmed Pharmaceutical Distributor
Address: Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City

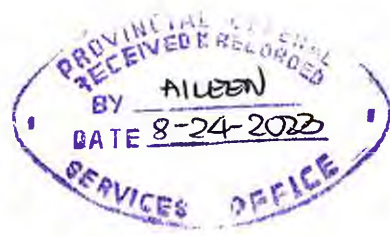
P.O. No. : 2023-08-0156(U)
Date : 8-24-2023

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		Amount
1	pc	500	Dolfenal 500mg	63.20	31,600.00
2	tab	500	Bioflu Tablet	13.10	6,550.00
3	cap	500	Alaxan FR 500mg	12.10	6,050.00
4	tab	500	Catapres 75mg	52.50	26,250.00
5	tab	400	Kremil S	10.00	4,000.00
6	cap	500	Loperamide (Lomotil) 2mg	13.00	6,500.00
7	bot	50	Plain NSS 500ml	74.88	3,744.00
8	pc	200	Salbutamol Nebules	10.88	2,176.00
9	tab	300	Buscopan 10mg	57.80	17,340.00
10	cap	500	Carbocistein 500mg	10.70	5,350.00
11	cap	500	Mefenamic Acid 500mg	12.66	6,330.00
12	pc	500	Loratidine 10mg	8.63	4,315.00



Total Amount One Hundred Twenty Thousand Two Hundred Five Pesos & 00/100 Php 120,205.00

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
Governor

Conforme: _____
Gcmed Pharmaceutical Distributor
(Signature over printed Name)
9-8-23
(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: _____