Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

: *Gcmed Pharmaceutical Distributor* P.O. No. : 22-10-00127

ss : *Lot 2 Blk 19, Villa Christine Royalle, San Miguel, Pasig City* Date : October 27, 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	amp	250	Ampicillin 1g vial	24.65	6,162.50
2	amp	50	Phenytoin 50mg/ml, 2ml ampule	679.99	33,999.50
3	amp	319	Ranitidine 25mg/ml, 2ml ampule	31.00	9,889.00
Total Amount			*Fifty Thousand Fifty One Pesos 00/100*	**Php**	**50,051.00**

PROVINCIAL ... RECEIVED ... BY Ann DATE 10.27.22 ... OFFICE

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

10.28.22
(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: ____________________