



Republic of the Philippines  
 PROVINCE OF ISABELA  
**PURCHASE ORDER**

P.O. No: 2781  
 DATE: \_\_\_\_\_  
 BY: \_\_\_\_\_

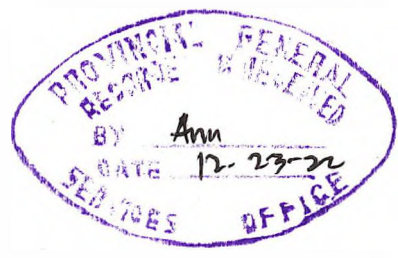
Supplier: Gcmed Pharmaceutical Distributor  
 Address: Lot 2 Blk 19, Villa Christine Royale, San Miguel, Pasig City

P.O. No.: 22-12-00179  
 Date: December 23, 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	mpule/nebu	150	Ipratropium + Salbutamol Nebule	34.43	5,164.50
2	set	2	Oxygen Regulator	3,850.00	7,700.00
3	set	2	Nebulizer Machine	7,500.00	15,000.00
4	set	3	Glucometer	2,520.00	7,560.00
5	boxes	5	Glucometer strips with lancet needles	1,920.00	9,600.00
6	set	3	Blood Pressure Apparatus	26,000.00	78,000.00
7	pcs	5	Thermometer (digital)	150.10	750.50



**Total Amount** One Hundred Twenty Three Thousand Seven Hundred Seventy Five Pesos 00/100 **Php** 123,775.00

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  
 \_\_\_\_\_  
 (Date) 12-24-22

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: \_\_\_\_\_