P.A. NO: 334
DATE: 4/3/23
BY:

Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

Name: Gcmed Pharmaceutical Distributor	P.O. No.: 23-04-M0011
Address: Lot 2 Blk 19, Villa Christine Royalle, San Miguel, Pasig City	Date: April 4, 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	Unit Cost	Amount
1	rolls	24	Absorbent Cotton 400grams	249.00	5,976.00
2	bottles	200	Alcohol 70%, Isoprophyl	129.00	25,800.00
3	pcs	12	Blood Transfusion Set	74.00	888.00
4	set	3	BP Cuff Adult w/ Inflation bag and bulb	899.00	2,697.00
5	gals	6	Activated Glutaraldehyde Solution w/ Activator	2,939.00	17,634.00
6	doz	30	Chromic 2/0 35-40mm (Cutting Needle)	539.90	16,197.00
7	doz	30	Chromic 3/0 w/ 35-40mm, Needle, Round	539.90	16,197.00
8	bxs	30	Disposable Syringes w/ Needle 10ml. X100's	568.28	17,048.40
9	bxs	30	Disposable Syringes w/ Needle 1ml. X100's	439.75	13,192.50
10	bxs	60	Disposable Syringes w/ Needle 3ml. X100's	439.45	26,367.00
11	pcs	100	Foley Bag Catheter Fr. 14	69.80	6,980.00
12	pcs	300	I.V. Cannula ga. 18	46.20	13,860.00
13	pcs	1500	I.V. Cannula ga. 22	46.20	69,300.00
14	pcs	300	I.V. Cannula ga. 24	48.80	14,640.00
15	pcs	60	I.V. Cannula ga. 26	48.50	2,910.00
16	pcs	600	Infusion Set, Adult	27.00	16,200.00
17	pcs	600	Infusion Set, Pedia	27.50	16,500.00
18	pcs	150	Nebulizer Kit w/ T-Tubing and Mouth Piece	110.00	16,500.00
19	pcs	150	Oxygen Cannula Adult	52.00	7,800.00
20	pcs	150	Oxygen Cannula Pedia	52.00	7,800.00
21	doz	15	Silk Suture 3/0 w/ 35-40mm. (Cutting Needle)	599.00	8,985.00
22	doz	15	Silk Suture 3/0 w/ 35-40mm. (Round Needle)	599.00	8,985.00
23	rolls	25	Surgical Roll Gauze 28x24 mesk x36"x100 yards	1,578.00	39,450.00
24	box	2	Razor Blade x100's, green color, kai	2,399.90	4,799.80
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Total Amount			*Three Hundred Seventy Six Thousand Seven Hundred Six Pesos & 70/100*		**Php 376,706.70**

PROVINCIAL ... RECEIVED & ... BY Ann DATE 4-4-23

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:

Cht
Gcmed Pharmaceutical Distributor
Signature over printed Name

4-4-23
(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: _____