



Republic of the Philippines
PROVINCE OF ISABELA

P.A. NO: 1884
DATE: _____
BY: Un

PURCHASE ORDER

Gcmed Pharmaceutical Distributor

P.O. No. : 23-10-M0120C

Address : Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City N

Date : October 18, 2023

Gentlemen:

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

Place of Delivery : _____ Delivery Term : _____
Date of Delivery : _____ Payment Term : _____

Item No.	Unit	Quantity	Description		Amount
1	box	30	Examination Gloves Large	628.45	18,853.50
2	box	50	Examination Gloves Medium	628.45	31,422.50
3	dozen	10	Slkam 3.09	1,800.00	18,000.00
4	piece	17	Epidural Gauge 18	994.84	16,912.28
5	box	20	IV Cath G18	1,090.00	21,800.00
6	box	20	IV Cath G24	1,090.00	21,800.00



Total Amount **One Hundred Twenty Eight Thousand Seven Hundred Eighty Eight Pesos & 28/100** **Php 128,788.28**

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,

Conforme:

[Signature]
Gcmed Pharmaceutical Distributor
(Signature over printed Name)
10-23-23
(Date)

[Signature]
RODOLFO T. ALBANO III
Governor

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: _____