



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

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

P.O. No. : 23-11-D0051B
Date : November 13, 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	cap	1000	Mefenamic Acid 500mg	12.66	12,660.00
2	tab	300	Montelukast 10mg	8.55	2,565.00
3	tab	300	Atorvastatin 40mg	16.88	5,064.00
4	cap	100	Celecoxib 200mg	9.87	987.00
5	amp	50	Dopamine 40mg/ml	88.86	4,443.00
6	amp	500	Hyoscine N-Butyl Bromide 20mg/ml	34.88	17,440.00
7	bot	240	PLR 1L	84.88	20,371.20
8	tab	500	Betahistine 16mg tab	34.38	17,190.00
9	bot	80	Cetirizine Syrup 60ml	78.35	6,268.00
10	vial	1000	Cefuroxime 750mg	89.88	89,880.00
11	tab	500	Ferrous Sulfate 500mg	1.05	525.00
12	vial	500	Omeprazole	334.86	167,430.00



Total Amount Three Hundred Forty Four Thousand Eight Hundred Twenty Three Pesos & 20/100 Php **344,823.20**

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:

Gcmed Pharmaceutical Distributor
(Signature over printed Name)
12-13-23
(Date)

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: _____