



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

P.A. NO: 2786
DATE: _____
BY: _____

Gcmed Pharmaceutical Distributor

P.O. No. : 24-11-M0166
Date : November 28, 2024

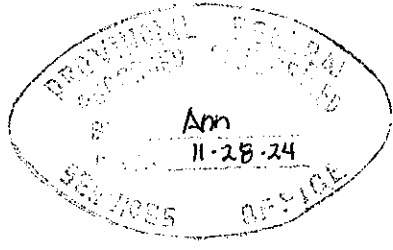
Address : Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City NCR,

Gentlemen:

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

Place of Delivery : PGSO (Manuel A. Roxas District Hospital) Delivery Term : _____ Charge _____
Date of Delivery : Seven (7) days after receipt of P.O. Payment Term: _____ Check _____

Item No.	Unit	Quantity	Description		Amount
1	box	1	Glucose 65ml x 6s - 1300 tests	111,220.00	111,220.00
2	box	1	Triglycerides, 65ml x 6s - 1300 tests	223,500.00	223,500.00
3	box	1	HDL - Direct (Cholesterol) 60ml x 4's / 20ml x 4's 1000 test	170,724.00	170,724.00



Total Amount Five Hundred Five Thousand Four Hundred Forty Four Pesos & 00/100 Php 505,444.00

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,

Conforme:

[Signature]
Gcmed Pharmaceutical Distributor
(Signature over printed Name)
12-05-24
(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: _____