



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

P.A. NO: 2450
DATE: _____
BY: _____

Supplier : **Gcmed Pharmaceutical Distributor**

P.O. No. : 24-12-140197

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

Date : December 11, 2024

Gentlemen:

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

Place of Delivery : PGSO (Milagros Albano 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	2	SGPT/ALT 65ml x 6s/13ml x 6s 1500 test	207,158.00	414,316.00
2	box	2	SGOT/AST 65ml x 6s/13ml x 4s 1500 test	207,158.00	414,316.00
3	tray	1	Blood Collecting Tube Lavander Top 2ml x 100s	1,320.00	1,320.00
4	box	2	HBSAG x 30s	2,472.50	4,945.00
5	set	2	Hematology Control BC5D	38,500.00	77,000.00

Total Amount

Nine Hundred Eleven Thousand Eight Hundred Ninety Seven Pesos & 00/100

Php

911,897.00

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:

Gcmed Pharmaceutical Distributor
(Signature over printed Name)

12-13-24
(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.: _____