



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

P.A. NO: 711
DATE: _____
BY: _____

Gcmed Pharmaceutical Distributor

P.O. No. : 24-04 - 140039L

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

Date : April 18, 2024

Gentlemen:

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

Place of Delivery : PGSO EDH 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	DF5 Diluent	36,300.00	72,600.00
2	bottle	4	Alkaflush	29,848.00	119,392.00
3	bottle	3	DF5 Lyse EO II	24,000.00	72,000.00
4	box	1	Dutch Cal M (W/Ice)	30,899.00	30,899.00



Total Amount Two Hundred Ninety Four Thousand Eight Hundred Ninety One Pesos & 00/100 **Php** 294,891.00

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)
4-22-24
(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.: _____

Certified Correct: _____

Date: _____