



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

Supplier : **Gcmed Pharmaceutical Distributor**

P.O. No. : 24-04-170054

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

Date : April 30, 2024

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	piece	3	Airway Adjunct Adult	139.40	418.20
2	piece	3	Airway Adjunct Pedia	139.40	418.20
3	unit	10	Stainless IV Stand	6,135.00	61,350.00
4	roll	10	Absorbent Cotton 400grams	248.90	2,489.00
5	piece	200	Heplock-In Stopper	23.80	4,760.00
6	box	50	Hypo-Allergenic Tape, 1"x12's	1,238.90	61,945.00
7	piece	200	Introcam g18	72.00	14,400.00
8	piece	300	Introcam g24	72.00	21,600.00
9	dozen	8	Silk Suture 2/0 w/ 35-40mm needle, round	598.90	4,791.20
10	box	50	Surgical Gloves 6 1/2" x 50's, Sterile	1,698.90	84,945.00
11	roll	12	Surgical Rolled Gauze 24x28mesk x 36'x100yards	1,577.90	18,934.80
12	piece	20	Torniquet	23.70	474.00
13	piece	20	Urine Bag w/ Connecting Tube, 2 liters	55.40	1,108.00
14	piece	750	Nebulizing Kit	109.90	82,425.00



Total Amount Three Hundred Sixty Thousand Fifty Eight Pesos & 40/100 **Php** 360,058.40

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)
09-02-24
(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: _____