



Republic of the Philippines  
 PROVINCE OF ISABELA  
**PURCHASE ORDER**

RA NO: 1284  
 DATE: \_\_\_\_\_  
 BY: \_\_\_\_\_

Supplier : GCMed Pharmaceutical Distributor

P.O. No. : 24-06-D0080

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

Date : June 6, 2024

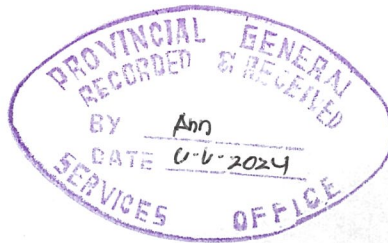
Gentlemen:

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

Place of Delivery : PGSO MARDH Delivery Term: \_\_\_\_\_ Charge \_\_\_\_\_

Date of Delivery : Seven (7) days after receipt of P.O. Payment Term: \_\_\_\_\_ Check \_\_\_\_\_

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	vial	990	Ampicillin 250mg Powder for Injection vial	37.69	37,313.10
2	tablet	300	Ascorbic Acid (VitaminC) 500mg Tablet	3.85	1,155.00
3	tablet	501	Azithromycin 500mg vial	79.52	39,839.52
4	vial	500	Cefazolin 1g Powder for Injection vial	214.85	107,425.00
5	nebule	1,000	Ipratropium + Salbutamol 500mcg + 2.5mg, 2.5ml	32.35	32,350.00



**Total Amount** Two Hundred Eighteen Thousand Eighty Two & 62/100 Pesos **Php** 218,082.62

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,

**RODOLFO T. ALBANO III**  
 Governor

Conforme:

GCMed Pharmaceutical Distributor

Signature over printed Name

07-19-24

(Date)

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: \_\_\_\_\_