



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

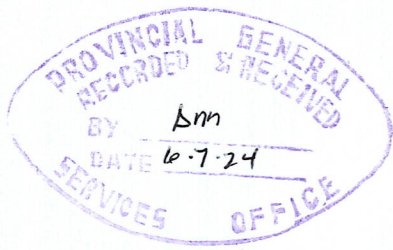
P.A. NO: 1290  
 DATE: \_\_\_\_\_  
 BY: \_\_\_\_\_

Supplier: Gcmed Pharmaceutical Distributor P.O. No.: 24-06-00086  
 Address: Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City N Date: June 7, 2024

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

Place of Delivery: PGSO - CANAYAN DISTRICT HOSPITAL 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	600	Ceftazidime 1g	135.81	81,486.00
2	ampule	50	Isosorbide Dinitrate 1mg/ml, 10ml	539.85	26,992.50



**Total Amount** One Hundred Eight Thousand Four Hundred Seventy Eight Pesos & 50/100 **Php 108,478.50**

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)  
7-29-24  
 (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: \_\_\_\_\_