



Republic of the Philippines
PROVINCE OF ISABELA

P.A. NO: 1701
DATE: _____
BY: _____

PURCHASE ORDER

Gcmed Pharmaceutical Distributor

P.O. No. : 24-07-D0097A

Date : July 31, 2024

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

Attestation:

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

Place of Delivery : PGSO CDH Delivery Term : _____ Charge _____
Date of Delivery : Seven (7) days after receipt of P.O. Payment Term: _____ Check _____

Item No.	Unit	Quantity	Description		Amount
1	bottle	2400	PNSS 1L	84.83	203,592.00



Total Amount Two Hundred Three Thousand Five Hundred Ninety Two Pesos & 00/100 Php **203,592.00**

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,

RODOLFO T. ALBANO III
Governor

Conforme:

Gcmed Pharmaceutical Distributor
(Signature over printed Name)
09-09-24
(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: _____