

Certified Correct:

Republic of the Philippines PROVINCE OF ISABELA

PURCHASE ORDER

	1588
P.A. NU:	
DATE:	
DI.	

	1.01		PURCHASE ORD	ER	D.O. N.	54 3	
Gcmed Pharmaceutical Distributor			4000 Danas Oits M	P.O. No. : Date :	24.08, 20099 Avaust 01, 2024		
ress: Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City N			1300 Pasay City N		August 01	, 2024	
Gentlemen: Please	furnish	this office	the following articles subject to the terms a	and conditions contain	ned herein:		
Place of Delive				elivery Term :	Charge		
Date of Delive	ry : _	Seven (7) days after receipt of P.O. P	ayment Term:	Check		
Item No. U	Init	Quantity	Description			Am	ount
1 v	vial	200	Vaccine, Immunoglobulin, Rabies(human)	150IU/ml, 2ml	1,449.85		289,970.00
			Ann 8-01-24				
Total Amou			undred Eighty Nine Thousand Nine Hun	-			289,970.00
			make the full delivery within the time specif shall be imposed.	led above, a penalty o	or one-tenth (1	1710) of one	,
					RODOL	- FO T. ALBA	NO III 🔥 -
Conforme: —		(Signati	harmaceutical Distributor ure over printed Name) M- N- N- H (Date)		NODOL	Governor	
In case of neg Approved per			pursuant to Section 369 (a) of RA 7160, the olution No.:	nis portion must be ac	complished).		

Date: