

P.A. NO: 1748



Republic of the Philippines  
PROVINCE OF ISABELA

DATE: \_\_\_\_\_  
BY: \_\_\_\_\_

**PURCHASE ORDER**

Supplier: **Gcmed Pharmaceutical Distributor**

P.O. No. : 24-08-MDOTIA

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

Date : August 2, 2024

Gentlemen:

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

Place of Delivery : <b>PGSO - SAN MARIANO COMMUNITY HOSPITAL</b>	Delivery Term :	Charge
Date of Delivery : <b>Seven (7) days after receipt of P.O.</b>	Payment Term:	Check

Item No.	Unit	Quantity	Description		Amount
1	piece	10	BP Cuff Adult w/ Inflation Bag & Bulb	898.88	8,988.80
2	box	50	Disposable Syringe w/ Needle 3ml	439.33	21,966.50
3	piece	30	Endotracheal Tube 7.0 w/ cuff	389.83	11,694.90
4	piece	30	Endotracheal Tube 7.5 w/ cuff	389.83	11,694.90
5	piece	30	Endotracheal Tube 6.0 w/ cuff	389.83	11,694.90
6	piece	30	Endotracheal Tube 3.0 w/ cuff	389.83	11,694.90
7	piece	30	Endotracheal Tube 3.5 w/ cuff	389.83	11,694.90
8	piece	30	Endotracheal Tube 4.5 w/ cuff	389.83	11,694.90
9	piece	30	Endotracheal Tube 5.5 w/ cuff	389.83	11,694.90
10	piece	30	Endotracheal Tube 5.0 w/ cuff	389.83	11,694.90
11	piece	500	Infusion Set Pedia	27.38	13,690.00
12	piece	300	Oxygen Cannula Adult	51.88	15,564.00
13	dozen	20	Silk Suture 2/0 Cutting	598.88	11,977.60
14	piece	30	Suction Catheter fr.5	14.88	446.40
15	piece	15	Suction Catheter fr.18	14.88	223.20
16	piece	15	Foley Catheter fr.12	69.68	1,045.20
17	piece	60	Foley Catheter fr.14	69.68	4,180.80
18	piece	2	Nasal Aspirator	72.36	144.72
19	piece	2	Draw Sheet 50x54	899.28	1,798.56
20	piece	2	Eye Sheet (Fabric) 20"x30"	699.37	1,398.74
21	piece	200	Blood Transfusion Sheet	73.88	14,776.00
22	piece	12	Leukoplast Surgical Tape 2.5cm x 5m	498.68	5,984.16



<b>Total Amount</b>	<b>One Hundred Ninety Five Thousand Seven Hundred Forty Three Pesos &amp; 88/100</b>	<b>Php</b>	<b>195,743.88</b>
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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: \_\_\_\_\_