



Republic of the Philippines
PROVINCE OF ISABELA

P.A. NO: 1779
DATE: _____
BY: _____

PURCHASE ORDER

Gcmed Pharmaceutical Distributor

P.O. No. : 2V-DB - 110089

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

Date : August 12, 2024

Attention:

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

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

Item No.	Unit	Quantity	Description		Amount
1	box	3	HbSag Elisa (Intec/Autobio) 96s	21,095.00	63,285.00
2	box	3	Anti HIV Elisa (Intec/Autobio) 96s	23,850.00	71,550.00
3	box	3	Anti HCV Elisa (Intec/Autobio) 96s	10,077.98	30,233.94
4	box	3	Anti TP (Syphilis) Elisa (Intec/Autobio) 96s	48,600.00	145,800.00
5	bottle	20	Typing Sera Anti-A, Epiclone	1,883.00	37,660.00
6	bottle	20	Typing Sera Anti-B, Epiclone	1,830.00	36,600.00
7	bottle	20	Typing Sera Anti-D, Epiclone	1,667.50	33,350.00
8	bottle	20	Anti Human Globulin (AHG) Epiclone	1,750.00	35,000.00
9	bottle	20	LISS, Epiclone	1,500.00	30,000.00
10	box	4	HbSag, Rapid Test, SD Bioline 30s	2,472.50	9,890.00
11	box	4	Anti HIV Elisa, Rapid Test, SD Bioline 50s	16,000.00	64,000.00
12	box	4	Anti HCV Elisa, Rapid Test, SD Bioline 50s	12,100.00	48,400.00
13	box	4	Anti TP (Syphilis) Elisa, Rapid Test, SD Bioline 50s	5,083.00	20,332.00
14	box	4	Rapid Test Pan Malaria 25s	8,950.00	35,800.00
15	pack	6	Yellow Tips 1000s	718.90	4,313.40



Total Amount Six Hundred Sixty Six Thousand Two Hundred Fourteen Pesos & 34/100 Php **666,214.34**

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,

Conforme:

[Signature]
Gcmed Pharmaceutical Distributor
(Signature over printed Name)
08-30-24
(Date)

[Signature]
RODOLFO T. ALBANO III
Governor

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: _____

GENERAL FUND