



Republic of the Philippines  
PROVINCE OF ISABELA

**PURCHASE ORDER**

P.A. NO: 1770  
DATE: \_\_\_\_\_  
BY: \_\_\_\_\_

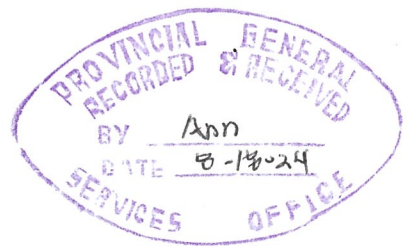
Supplier: Gcmed Pharmaceutical Distributor  
Address: Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City N

P.O. No. : 24-DB-MD092  
Date : August 18, 2024

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

Place of Delivery : PGSO (Echague District Hospital) 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	1	Cholesterol 65ml x 6s - 1300 tests	123,197.00	123,197.00
2	box	1	Dutch Cal M, 3ml x 6s (Multicalibrator)	30,899.00	30,899.00
3	box	1	Triglycerides, 65ml x 6s - 1300 tests	223,500.00	223,500.00
4	bottle	2	DF5 Lyse EO-II; 200ml	24,000.00	48,000.00
5	box	2	Solution Pack (ISEPack)	38,250.00	76,500.00
6	box	1	Albumin	41,320.00	41,320.00
7	box	3	ACG Pregnancy Test x 50s	1,160.00	3,480.00
8	box	18	RPR Syphilis x 30s	5,083.00	91,494.00



**Total Amount** Six Hundred Thirty Eight Thousand Three Hundred Ninety Pesos & 00/100 Php **638,390.00**

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)  
09-30-24  
(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: \_\_\_\_\_