

ed Pharmaceutical Distributor

## Republic of the Philippines PROVINCE OF ISABELA

## **PURCHASE ORDER**

P.A. NO:	2257
DATE:	
BY:	

: Angust 19. 2024

2257

gend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City N

P.O. No.	:	2408 40092		0921
Date	:	Land	n	201

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

of Delivery: PGSO **Delivery Term:** Charge ate of Delivery: Seven (7) days after receipt of P.O. Payment Term: Check Item No. Description Unit Quantity **Amount** Alcohol 70% 500ml Isoprophyl 145 128.90 18,690.50 1 bot 2 doz 24 Catgut Chromic 0 w/ 35-40mm, Round 539.80 12,955.20 3 box 20 Disposable Syringe (Insulin) w/ Needle Ga.29 x 1/2 x 0.5ml x 1,403.85 28,077.00 ECG Paper 80mm x 20 meters 4 roll 24 169.53 4,068.72 100 5 Heplock-In-Stopper 23.80 2,380.00 рс Polyglactin Absorbable Suture 1/0 w/ 35-40mm Needle, 6 72 993.70 71,546.40 рс 7 12 Silk Suture 3/0 w/ 35-40mm needle, Cutting 598.90 7,186.80 doz 8 600 Urine Container Plastic w/ Cover 8,568.00 рс 14.28 **Total Amount** One Hundred Fifty Three Thousand Four Hundred Seventy Two Pesos & 62/100 Php 153,472.62 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 Conforme: Governor Gcmed Pharmaceutical Distributor (Signature over printed Name) 10-04-24 (Date)

In case of negotiated purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished). Approved per Sanggunian Resolution No.: \_\_\_\_ Date: \_\_\_\_ Certified Correct: \_\_\_