



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

P.A. NO: 2551
DATE: _____
BY: _____

Gcmed Pharmaceutical Distributor

P.O. No. : 24-10 - 00162
Date : October 15, 2024

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

gentlemen:

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

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

Item No.	Unit	Quantity	Description		Amount
1	bottle	20	Sevoflurane 250ml	10,999.83	219,996.60



Total Amount Two Hundred Nineteen Thousand Nine Hundred Ninety Six Pesos & 60/100 **Php** 219,996.60

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)

10-15-24
(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: _____