



Republic of the Philippines
PROVINCE OF ISABELA

P.A. NO. 2824
DATE: _____
BY: _____

PURCHASE ORDER

Gcmed Pharmaceutical Distributor

P.O. No. : 24-10-D0169
Date : October 21, 2024

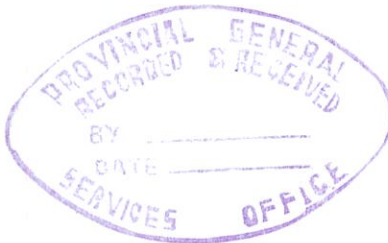
Address : Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City NCR,

Terms:

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

Place of Delivery : PGSO (Cauayan 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	vial	2000	Ceftazidime 1g	135.79	271,580.00
2	tablet	200	Doxofyline 400mg	37.82	7,564.00



Total Amount Two Hundred Seventy Nine Thousand One Hundred Forty Four Pesos & 00/100 **Php / 279,144.00**

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,

Conforme:

Chen
Gcmed Pharmaceutical Distributor
(Signature over printed Name)
12-03-24
(Date)

Rodolfo T. Albano III
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: _____