



Republic of the Philippines
PROVINCE OF ISABELA

P.A. NO: 2800

DATE: _____
BY: _____

PURCHASE ORDER

Pharmaceutical Distributor

P.O. No. : 24-11 - HD157

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

Date : November 25, 2024

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

Delivery : **PGSO (Echague District Hospital)**

Delivery Term :

Charge

of Delivery : **Seven (7) days after receipt of P.O.**

Payment Term:

Check

Item No.	Unit	Quantity	Description		Amount
1	box	2	DF5 Diluent/Detergent 20L	36,300.00	72,600.00
2	box	5	HbSAG x 30s	2,472.50	12,362.50
3	bottle	6	DF5 Lyse EO-II 200ml	24,000.00	144,000.00
4	box	1	Urea UV (BUN) 65ml x 6s/13ml x 6s -1500 tests	171,385.00	171,385.00
5	box	1	Creatinine 65ml x 6s/13ml x 4s/20ml - 1500 tests	101,500.00	101,500.00
6	box	1	HDL-Direct (Cholesterol) 60ml x 4s/20ml - 1000 tests	170,724.00	170,724.00
7	tray	20	Blood Collecting Tube Lavander Top 2ml x 100s	1,320.00	26,400.00
8	pack	1	GA Sample Cups x 500s	14,259.00	14,259.00
9	box	1	Dutch Cal M 3ml x 6s (Multicalibrator)	30,899.00	30,899.00



Total Amount

Seven Hundred Forty Four Thousand One Hundred Twenty Nine Pesos & 50/100

Php **744,129.50**

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:

CM
Gcmed Pharmaceutical Distributor
(Signature over printed Name)
11-28-24
(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: _____