

Republic of the Philippines PROVINCE OF ISABELA

DA NO:	2798
DATE:	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.
BY:	

PURCHASE ORDER

Gcmed Pharmaceutical Distributor

: 24-11 - 40159 P.O. No.

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

: November 26, 2024 Date

itlemen:

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

Charge Place of Delivery : PGSO (Echague District Hospital) **Delivery Term: Payment Term:** Check Seven (7) days after receipt of P.O.

Date of De	elivery :	y: Seven (7) days after receipt of P.O. Payment Term:		Jileck	
Item No.	Unit	Quantity	Description		Amount
1 2 3 4 5 5		1 1 1 1 4	Typhidot T3 PT APTT Alkaflush 1000ml	13,360.00 14,420.00 16,320.00 14,850.00 29,848.00	13,360.00 14,420.00 16,320.00 14,850.00 119,392.00
			SELVICES OFFICE		
				D 8 00/400	Dha 479 242 00

One Hundred Seventy Eight Thousand Three Hundred Forty Two Pesos & 00/100 | Php / 178,342.00 **Total Amount** In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one

Very truly yours,

Conforme: eutical Distributor Gcmed Pharmad (Signature over printed Name) 11-28-21 (Date)

percent for every day of delay shall be imposed.

Governor

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

Date: