

P.A. NO: 2893

DATE: _____
BY: _____



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

Supplier : Gcmed Pharmaceutical Distributor

P.O. No. : 24-11-MOIG 2

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

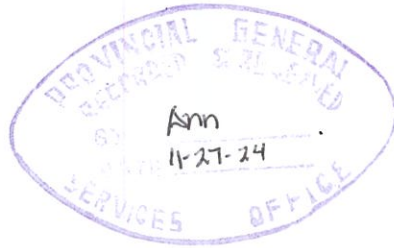
Date : November 27, 2024

Gentlemen:

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

Place of Delivery : <u>PGSO (Echague District Hospital)</u>	Delivery Term : _____	Charge _____
Date of Delivery : <u>Seven (7) days after receipt of P.O.</u>	Payment Term: _____	Check _____

Item No.	Unit	Quantity	Description		Amount
1	set	2	Dilatation and Curettage (D&C) Set	33,380.00	66,760.00
2	set	2	Normal Spontaneous Delivery Set	57,600.00	115,200.00
3	roll	15	Electrocardiogram (ECG) Paper 80mm x 20m	169.51	2,542.65
4	piece	60	Foley Bag Catheter fr14	69.68	4,180.80
5	piece	40	Foley Bag Catheter fr12	69.68	2,787.20



Total Amount

One Hundred Ninety One Thousand Four Hundred Seventy Pesos & 65/100

Php 191,470.65

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)

12-04-24
(Date)

In case of negotiated purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished).

Approved per Sanggunian Resolution No.: _____

Certified Correct: _____

Date: _____