

P.A. NO: 2021
 DATE: _____
 BY: _____



Republic of the Philippines
 PROVINCE OF ISABELA

PURCHASE ORDER

Gcmed Pharmaceutical Distributor

P.O. No. : 24-11 - M0163

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

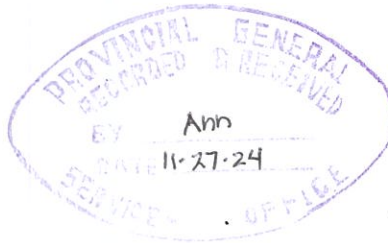
Date : November 27, 2024

Terms:

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

Place of Delivery : PGSO (Palanan Station 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	box	1	HDL Direct (Cholesterol) 50ml x 3s/17ml x 3s	170,724.00	170,724.00
2	box	1	Triglycerides 65ml x 6s	223,500.00	223,500.00
3	box	1	Cholesterol 65ml x 6s	123,197.00	123,197.00



Total Amount Five Hundred Seventeen Thousand Four Hundred Twenty One Pesos & 00/100 **Php** 517,421.00

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:

[Signature]
 Gcmed Pharmaceutical Distributor
 (Signature over printed Name)
12-04-24
 (Date)

[Signature]
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: _____