



Republic of the Philippines
PROVINCE OF ISABELA

P.A. NO. 2022
DATE: _____
BY: _____

PURCHASE ORDER

Pharmaceutical Distributor

P.O. No. : 24-11 - M017D

ension Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City NCR,

Date : November 29, 2024

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

Delivery : PGSO (Milagros Albano District Hospital) Delivery Term : _____ Charge _____
Delivery : Seven (7) days after receipt of P.O. Payment Term: _____ Check _____

No.	Unit	Quantity	Description		Amount
1	pack	10	ECG Electrode	950.00	9,500.00
2	dozen	20	Silk 0 w/ 35-40mm Needle, Round	598.88	11,977.60
3	box	50	Hypoallergenic Tape 1" x 12s	1,238.88	61,944.00
4	box	30	Hypoallergenic Tape 2" x 12s	1,238.88	37,166.40



Total Amount **One Hundred Twenty Thousand Five Hundred Eighty Eight Pesos & 00/100** **Php 120,588.00**

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,

RODOLFO T. ALBANO III
Governor

Conforme:
Gcmed Pharmaceutical Distributor
(Signature over printed Name)
12-05-24
(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: _____