



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

P.A. NO: 2580
DATE: _____
BY: _____

Supplier: Gcmed Pharmaceutical Distributor

P.O. No. : 24-12-00180

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

Date : December 20, 2024

Gentlemen:

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

Place of Delivery : PGSO (San Mariano Community 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	bottle	72	Ascorbic Acid drops	33.52	2,413.44
2	nebule	600	Budesonide nebule	54.83	32,898.00
3	nebule	800	Ipratropium + Salbutamol nebule	32.33	25,864.00
4	vial	800	Hydrocortisone 100mg	69.82	55,856.00
5	capsule	600	Celecoxib 200mg	9.82	5,892.00
6	tablet	300	Clonidine 75mcg	16.32	4,896.00
7	tablet	500	Co-Amoxiclav 625mg	18.83	9,415.00
8	tablet	500	Ketoanalogue Amino Acid Essential	52.82	26,410.00
9	tablet	1000	Mefenamic Acid 500mg	3.83	3,830.00



Total Amount One Hundred Sixty Seven Thousand Four Hundred Seventy Four Pesos 44/100 Php 167,474.44

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)

12-18-24
(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: _____