



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

P.A. NO: 2869
DATE: _____
BY: _____

From: **Gcmed Pharmaceutical Distributor**

P.O. No. : 24-12-10210
Date : December 16, 2024

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

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	6	LYC-2 500ml	31,100.00	186,600.00
2	pack	4	DIL-C 20 liters	31,000.00	124,000.00



310,600.00
33,278.57
277,321.43

Total Amount Three Hundred Ten Thousand Six Hundred Pesos & 00/100 **Php** 310,600.00

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)
12-16-24
(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: _____