



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

Supplier : Gcmed Pharmaceutical Distributor

P.O. No. : 24-02 - D0026

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

Date : February 15, 2024

Gentlemen:

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

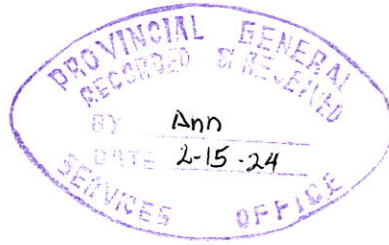
Place of Delivery : PGSO - CANTYAN DISTRICT HOSPITAL

Delivery Term : _____ Charge _____

Date of Delivery : Seven (7) days after receipt of P.O.

Payment Term: _____ Check _____

Item No.	Unit	Quantity	Description		Amount
1	vial	90	Ciprofloxacin 2mg/ml, 100ml	240.95	21,685.50



Total Amount

Twenty One Thousand Six Hundred Eighty Five Pesos and 50/100 Only

Php 21,685.50

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)
3 - 5 - 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: _____