



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

Supplier: Gcmed Pharmaceutical Distributor
Address: Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City NG

P.O. No. : 24-02-00030
Date : February 15, 2024

Gentlemen:

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

Place of Delivery : PGSO Delivery Term : _____ Charge _____
Date of Delivery : Seven (7) days after receipt of P.O. Payment Term: _____ Check _____

Item No.	Unit	Quantity	Description		Amount
1	capsule	2000	Celecoxib 200mg	9.87	19,740.00
2	ampule	150	Chlorphenamine 10mg	11.86	1,779.00
3	tablet	500	Cinnarizine 25mg	1.37	685.00
4	tablet	1000	Ciprofloxacin 500mg	7.88	7,880.00
5	capsule	600	Clindamycin 300mg	36.87	22,122.00
6	tablet	500	Clonid	16.37	8,185.00
7	tablet	1000	Clopid	2.67	2,670.00
8	bottle	24	Dicycloverine 10mg/5ml, 60ml syrup	13.86	332.64
9	ampule	1000	Furosemide 20mg	19.87	19,870.00
10	tablet	500	Folic Acid 5mg	3.47	1,735.00
11	vial	1000	Hydrocortisone 100mg	69.86	69,860.00
12	tablet	500	Hyoscine N-Butyl Br 10mg	5.62	2,810.00
13	vial	2000	Hyoscine N-Butyl Br 20mg/ml	34.88	69,760.00
14	tablet	500	Ibuprofen 400mg	2.02	1,010.00
15	capsule	1000	Ketoanalogues Essential Amino Acid	52.87	52,870.00
16	bottle	144	Lactulose	209.88	30,222.72
17	bottle	36	Lagundi 300mg/5ml, 60ml syrup	58.37	2,101.32
18	bottle	24	Mebendazole 100mg/5ml, 60ml	25.38	609.12
19	tablet	1000	Metformin 500mg	3.71	3,710.00



Total Amount Three Hundred Seventeen Thousand Nine Hundred Fifty One pesos and 80/100 Php 317,951.80

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: _____