



Republic of the Philippines  
PROVINCE OF ISABELA

**PURCHASE ORDER**

Supplier : **Gcmed Pharmaceutical Distributor**

P.O. No. : **24-02-M0004**

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

Date : **February 5, 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	box	1	Dutch Cal M, 3ml x 6's (Multicalibrator)	30,899.00	30,899.00
2	box	1	Dutch Trol N, 5ml x 10's (Control-Normal)	45,000.00	45,000.00
3	box	1	Dutch Trol P, 5ml x 10's (Control-Pathologic)	45,000.00	45,000.00
4	box	2	SGPT/ALT, 65ml x 6's / 13ml x 6's, 1500 tests	207,158.00	414,316.00
5	box	2	SGOT/AST, 65ml x 6's / 13ml x 4's, 1500 tests	207,158.00	414,316.00



**Total Amount** **Nine Hundred Forty Nine Thousand Five Hundred Thisty One Pesos only** Php **949,531.00**

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:

\_\_\_\_\_  
Gcmed Pharmaceutical Distributor  
(Signature over printed Name)  
2-26-24  
(Date)

**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: \_\_\_\_\_