



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

Gcmed Pharmaceutical Distributor

P.O. No. : 24-02-10027B

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

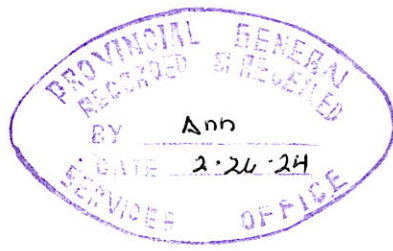
Date : February 26, 2024

Attention:

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	bottle	36	OGTT 75g	415.00	14,940.00
2	box	19	HbSAG x 30s	2,472.50	46,977.50
3	box	1	PSA FIA x 25s	16,385.00	16,385.00
4	bottle	2	LYA-2 Lyse, 500ml	24,000.00	48,000.00
5	box	1	SGOT/AST, 65ml x 6s / 13ml x 4s - 1500 test	207,158.00	207,158.00
6	pack	6	HBAIC FIA x 25s	10,780.00	64,680.00
7	pack	8	Dil-A, 20 liters	29,750.00	238,000.00
8	bottle	2	LYA-1 Lyse, 200ml	21,100.00	42,200.00
9	bottle	4	LYA-2 Lyse, 500ml	24,000.00	96,000.00
10	bottle	50	Anti Human Globulin	1,750.00	87,500.00



Total Amount Eight Hundred Sixty One Thousand Eight Hundred Forty Pesos & 50/100 Php **861,840.50**

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)
4-8-24
(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: _____