



Republic of the Philippines  
PROVINCE OF ISABELA

**PURCHASE ORDER**

Supplier: **Gcmed Pharmaceutical Distributor**

P.O. No. : **24-02-40027C**

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

Date : **February 26, 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	3	Creatinine, 65ml x 6s / 13ml s 6s - 1500 test	101,500.00	304,500.00
2	box	1	Dutch Cal M. 3ml x 6s (Multicalibrator)	30,899.00	30,899.00
3	box	1	Dutch Trol N. 5ml x 10s (Comtrol-Normal)	45,000.00	45,000.00
4	box	2	HDL-Direct (Cholesterol) 60ml x 4s / 20ml x 4s - 1000 test	170,724.00	341,448.00
5	box	1	Triglycerides, 65ml x 6s - 1300 test	223,500.00	223,500.00
6	box	4	Cleanser (CLE P), 50ml	13,000.00	52,000.00



**Total Amount** **Nine Hundred Ninety Seven Thousand Three Hundred Forty Seven Pesos 7 00/100** **Php 997,347.00**

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,

**RODOLFO T. ALBANO III**  
Governor

Conforme:   
Gcmed Pharmaceutical Distributor  
(Signature over printed Name)  
4.22.24  
(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: \_\_\_\_\_