

## Republic of the Philippines PROVINCE OF ISABELA

## **PURCHASE ORDER**

ier : Gcmed Pharmaceutical Distributor

Quantity

P.O. No.

: 24.02 . 40027 F

udress : Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City No.

Date

: February 26, 2024

**Amount** 

G	en	tle	en	ne	n:

Item No.

Unit

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

 Place of Delivery :
 PGSO
 Delivery Term :
 Charge

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

1 box 2 box 3 box 4 bottle 5 tray 6 tray 7 box 8 box 9 box 10 box 11 box 12 box	SGPT/ALT, 65ml x 6s / 13ml x 6s, 1500 test SGOT/AST, 65ml x 6s / 13ml x 4s, 1500 test Uric Acid (BUA), 65ml x 6s, 1300 test A1 Flush (Alkaflush) 1000ml Blood Collecting Tube Lavander Top 3ml x 100s Blood Collecting Tube Yellow Top 4ml x 100s Blood Glucose Strips CRP FIA x 25s FT4 FIA x 25s RPR/Syphilis HbSAG x 30s Troponin I (Ctnl) FIA x 25s	207,158.00 207,158.00 131,445.00 29,848.00 1,320.00 2,900.00 12,604.00 12,950.00 5,083.00 2,472.50 19,180.00	207,158.00 207,158.00 131,445.00 179,088.00 23,760.00 21,120.00 58,000.00 25,208.00 25,900.00 50,830.00 24,725.00 38,360.00
Total Amount	Nine Hundred Ninety Two Thousand Seven Hundred Fifty Two Pe		Php 992,752.00

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)

1- 12 -2-1

(Date)

Mo	
RODOLFO T. ALBANO III	
Governor	1
$\Psi$	1

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:			