



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

Supplier: **Gcmed Pharmaceutical Distributor**

P.O. No. : **24-03-10049**

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

Date : **March 1, 2024**

Attention:

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

Place of Delivery : **PGSO**

Delivery Term :

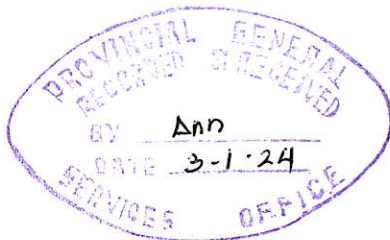
Charge

Date of Delivery : **Seven (7) days after receipt of P.O.**

Payment Term:

Check

| Item No. | Unit | Quantity | Description | | Amount |
|----------|--------|----------|---|--------|-----------|
| 1 | Bottle | 10 | Cefuroxime 250mg/5ml, 50ml oral suspension | 204.83 | 2,048.30 |
| 2 | Bottle | 30 | Lactulose 3.3 g/5ml (3.35g/5ml), 120ml syrup | 209.85 | 6,295.50 |
| 3 | Tablet | 1100 | Cetirizine 10mg tablet | 4.35 | 4,785.00 |
| 4 | Ampule | 100 | Nicardipine 1mg/ml, 10ml solution for injection | 598.41 | 59,841.00 |



Total Amount

Seventy Two Thousand Nine Hundred Sixty Nine Pesos & 80/100

Php

72,969.80

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)
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: _____