



Republic of the Philippines  
PROVINCE OF ISABELA

**PURCHASE ORDER**

DATE:

BY:

Supplier: **Gcmed Pharmaceutical Distributor**

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

P.O. No. : **24-12-DO181A**

Date : **December 20, 2024**

Gentlemen:

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

Place of Delivery : **PGSO (Manuel A. Roxas District Hospital)**

Delivery Term :

Charge

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

Payment Term:

Check

Item No.	Unit	Quantity	Description		Amount
1	vial	300	Vaccine Vero Cell (Purified) 2.5IU/0.5ml vial+diluent	1,679.84	503,952.00
<div>PROVINCIAL GENERAL RECORDED &amp; RECEIVED BY Ann DATE 12-20-24 SERVICES OFFICE</div>					

**Total Amount**


**Five Hundred Three Thousand Nine Hundred Fifty Two Pesos & 00/100**

Php **503,952.00**

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)

**12-20-24**  
(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: \_\_\_\_\_