



Republic of the Philippines
PROVINCE OF ISABELA

PURCHASE ORDER

GCMED CORP.

P.O. No. : 25-02-00005 A

Date : February 11, 2025

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

Gentlemen:

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

Place of Delivery : PGSO (Cauayan 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	tablet	600	Azithromycin 500mg	79.50	47,700.00
2	tablet	500	Ketoanalogue Essential Amino Acid	52.82	26,410.00
3	capsule	500	Multivitamins	4.73	2,365.00
4	ampule	1000	Furosemide 10mg/ml, 2ml solution for injection	19.82	19,820.00
5	ampule	600	Tramadol 50mg/ml, 1ml solution for injection	40.83	24,498.00
6	tablet	600	Potassium Chloride 600mg tablet	11.91	7,146.00
7	tablet	2000	Ferrous Salt (equiv. to 60mg elemental iron) tablet	1.00	2,000.00
8	ampule	1000	Ketorolac 30mg/ml, 1ml solution for injection	24.83	24,830.00
9	tablet	210	Isosorbide 5 Mononitrate 60mg modified release tablet	10.33	2,169.30
10	tablet	210	Eperisone 50mg	37.83	7,944.30
11	tablet	500	Metformin 500mg film coated tablet	3.66	1,830.00
12	tablet	1000	Ceforoxime 500mg tablet	37.37	37,370.00



Total Amount

Two Hundred Four Thousand Eighty Two Pesos & 60/100

Php 204,082.60

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 CORP.

(Signature over printed Name)

02-11-25

(Date)