



Republic of the Philippines
 PROVINCE OF ISABELA
PURCHASE ORDER

Supplier : GCMed Pharmaceutical Distributor
 Address : Lot 2 Blk-19 Villa Christine Royale, San Miguel, Pasig City

P.O. No. : 20-12-0252 (6)
 Date : 12-29-20

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 this P.O. Payment Term: Check

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	pcs	1,000	Swab Test	750.00	750,000.00
2	pcs	24,000	Multivitamins	27.50	660,000.00
Total Amount		One Million Four Hundred Ten Thousand Pesos			Php 1,410,000.00

Jan
17-20-20

GCMED PHARMACEUTICAL

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
 Provincial Governor

Conforme:

GCMed Pharmaceutical Distributor
 (Signature over printed name)

12-29-20
 (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: _____

SC#4437