



Republic of the Philippines  
PROVINCE OF ISABELA  
**PURCHASE ORDER**

P.A. NO. 2231  
D. 10-8-21  
B. 8

Supplier : Medical Gallery Trading Co.

P.O. No. : 21-10-0217

Address : 1357 Rizal Ave., Sta. Cruz, Manila

Date : 10-8-21

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 P.O.

Payment Term: Check

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	kits	174	Medicine Kit with Canister w/o Handle 10 tablets Vitamin C 500mg with Zinc 7 Tablets Melatonin 3mg (Sleepwell) 1 Bottle Alcohol, 250ml 5 pcs Facemask, earloop 1 pc Face Towel, cotton white 1 pc Bath soap	435.00	75,690.00



GENERAL FUND

**Total Amount**

**Seventy Five Thousand Six Hundred Ninety Pesos 00/100**

**Php 75,690.00**

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:

Medical Gallery Trading Co.

Signature over printed Name

10.8.21

(Date)

**RODOLFO T. ALBANO III**  
Provincial 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: \_\_\_\_\_



Republic of the Philippines  
PROVINCE OF ISABELA  
**PURCHASE ORDER**

Supplier: GCMed Pharmaceutical Distributor

P.O. No.: 21-02-0210

Address: Lot 2 Blk 19 Villa Christine Royale, San Miguel Pasig City

Date: 09-30-21

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 P.O.

Payment Term: CHECK

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	boxes	198	Multivitamins Tablet, 24's	660.00	Php 130,680.00
<div>PROV. RECEIVED &amp; RECORDED BY ALBANO DATE 9-30-21 SERVICES OFFICE</div>					
<b>Total Amount</b>			<b>One Hundred Thirty Thousand Six Hundred Eighty Pesos</b>		<b>Php 130,680.00</b>

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:

for Chtia  
GCMed Pharmaceutical Distributor

Signature over printed Name

10-14-21

(Date)

RODOLFO T. ALBANO III  
Provincial 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: \_\_\_\_\_

GENERAL F-101