



GENSAN MEDICAL CENTER

Purok Veterans, Brgy Calumpang, National Highway, General Santos City, 9500

Contact No: (083) 887-9898

E-mail Address: contactus@gensanmed.com

VAT Reg. TIN: 000-072-888-460-VAT

Print Date:
Print Time:

11/27/2025
9:52:20AM

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PURCHASE ORDER

Supplier: AC VAXX PLUS, INC.

Address: 440 NLSA, SAN ISIDRO GENERAL SANTOS CITY

TIN: 467-857-111-000

Payment Terms: MONTHLY

P.O. No. New **4109**

Date 11/27/2025

P.R. No.

Item No.	QTY	UoM	Description	Last Delivered	Unit Cost	Gross	Discount	Net
4031	3	JAR	SILVER SULFADIAZINE (SILVEX) 1% 1MG/G, 500G	8/6/25	1,950.00	5,850.00	0.00	5,850.00
5346	20		SILVER SULFADIAZINE (SILVEDERMA) 1% 1MG/G, 20G CREAM	7/25/25	350.00	7,000.00	0.00	7,000.00
5442	50		NICARDIPINE (AFREEDIPINE) as hydrochloride 1MG/ML, 10ML AMPOULE	10/8/25	700.00	35,000.00	0.00	35,000.00
5482	50	AMPO LE	NOREPINEPHRINE (NUPIRA) s bitrate 1MG/ML, 10ML AMPOULE	10/30/25	1,300.00	65,000.00	0.00	65,000.00

Total Net Cost 112,850.00

Less discount 0.00

Grand Total **112,850.00**

Words : One Hundred Twelve Thousand Eight Hundred Fifty Pesos Only

Remarks:

NOTE :

Suppliers are hereby required to validate the P.O. prices stated upon the receipt of this P.O., should there be any changes, an advice should be given to the Purchasing Officer atleast 1 (one) day before the Delivery Date.
For any price changes, otherwise we will follow the prices favorable to Gensan Medical Center

Prepared By:

Mary Charmaine Joree M. Peralta

Logistics and Medication Management
Department Head

Approved By:

KEVIN PAUL PALACA, RSW, MHCM
Administrator/CEO

" THIS DOCUMENT SHALL BE VALID FOR FIVE (5) YEARS FROM THE DATE OF PERMIT TO USE"
"THIS DOCUMENT IS NOT VALID FOR CLAIM OF INPUT TAX"