



# GENSAN MEDICAL CENTER

Print Date:  
Print Time:

12/10/2025  
10:12:26AM

Page -1 of 1

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

## PURCHASE ORDER

Supplier: EURO-MED LABORATORIES PHIL., INC.

P.O. No. New **4235**

Address: PUROK MALIPAYON, 2ND BO., SAN ISIDRO, LAGAO, GENERAL  
SANTOS CITY

Date **12/10/2025**

TIN: 00-288-655-003

P.R. No. **23 0002998**

Payment Terms: MONTHLY

Item No.	QTY	UoM	Description	Last Delivered	Unit Cost	Gross	Discount	Net
3319	96	BOTTL	MANNITOL - EUROMED 500ML BOTTLE	10/13/25	188.80	18,124.80	0.00	18,124.80
3402	92	TUBE	MUPIROCIN - RITEMED 2%, 5G OINTMENT	12/5/25	210.38	19,354.50	0.00	19,354.50
3732	100	TABLE	BISACODYL - RITEMED 5MG TABLET	2/28/25	12.75	1,275.00	0.00	1,275.00
4441	100	CAPS LE	CLINDAMYCIN-RITEMED 300MG CAPSULE	8/29/25	32.09	3,208.75	0.00	3,208.75
							Total Net Cost	<b>41,963.05</b>
							Less discount	0.00
							Grand Total	<b>41,963.05</b>

Words : Forty-one Thousand Nine Hundred Sixty-three Pesos And Five Centavo/s Only

Remarks: BELOW STOCK LEVEL

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:

Approved By:

  
**Mary Charmaine Joree M. Peralta**

Logistics and Medication Management  
Department Head

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"