



GENSAN MEDICAL CENTER

Print Date:
Print Time:

11/30/2025
1:03:26PM

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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: MEDHAUS PHARMA, INC.

P.O. No. New **4149**

Address: 139 K-1ST ST., KAMUNING QUEZON CITY, METRO MANILA

Date 11/30/2025

P.R. No. 23 0002949

TIN: 001-965-865-000

Payment Terms: MONTHLY

Item No.	QTY	UoM	Description	Last Delivered	Unit Cost	Gross	Discount	Net
3366	50	BOTTL	METRONIDAZOLE (MEDGYL) (500MG) 5MG/ML, 100ML VIAL	11/6/25	125.00	6,250.00	0.00	6,250.00
Total Net Cost								6,250.00
Less discount								0.00
Grand Total								6,250.00

Words : Six Thousand Two Hundred Fifty Pesos 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"