

PURCHASE ORDER

Supplier: CATHYLEANE PURIFIED WATER STATION
Address: 28-33 ST. CARMENVILLE ANGELES CITY
Tel./ Fax No.: 09295700236
Supplier Registered with: PHILHEALTH
P.O. No.: 16-013
Date: March 1, 2016
Term of Payment: 15 days
Mode of Procurement: Small Value Procurement

Please deliver to this Office on March to June 2016 from receipt hereof :




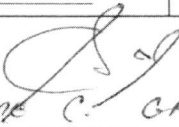
NO.	QTY.	UNIT	ITEM / DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	280	Gal.	DRINKING WATER *****Nothing Follows***** Note: 1. DELIVERY - ONCE A WEEK EXCEPT SATURDAY, SUNDAY & HOLIDAYS 2. MONTHLY BILLING (LHIO Angeles Water Consumption for the month of March to June 2016)	30.00	8,400.00
			PR no. 16-SOA-001	TOTAL AMT.	PHP 8,400.00

Conditions:

- The Agency shall impose penalty in an amount equivalent to 1/10 of 1 percent of the value of undelivered order for each day of the delay as liquidated damages.
- Render your bills in triplicate copies including the original.
- If the date of receipts of this Purchase Order (P.O.) by the dealer is not indicated, it shall be deemed received on March 1, 2016.
- For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts, should be submitted by the supplier.
- Delivery shall be made only on MONDAYS to THURSDAYS not later than 3 P.M. except for emergency cases wherein prior notification in such cases shall be given by this office.

Very truly yours,


DANILO M. REYNES, M. D.
MSD, Division Chief

Certified Budget Available:	Funds available in the amount of	APPROVED
 WILLIEANNE D. CAYACO Fiscal Controller III	 ANGELITAS. REYES Fiscal Controller IV	 LOLITA V. TULIAO, CESO V OIC, Vice-President PRO III
Within the COB <u>042016</u> Expense Code <u>994-10</u> Budget <u>ASS Cstob 2-13</u> Remarks:		
CONFORME:  SIGNATURE OVER PRINTED NAME OF SUPPLIER/ REPRESENTATIVE		DATE RECEIVED COPY OF P.O.