

Supplier TRAIL OF GARMENTS MANUFACTURER

Address ILIGAN CITY

Tel./Fax : _____

RIV No. 482-16

Date Monday, October 24, 2016

Purchase Order No. : _____

Date : 14 NOV 2016

Terms of Payment : _____

Mode of Procurement : Local Shopping

16 - 12 - 2139

Please deliver to this Office within seven(7) working days from receipt hereof the following:

QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
150	pcs	PHILHEALTH T-SHIRT WITH COLLAR, Cotton type xxxxxx nothing follows xxxxxx See attached sample.	250.00	37,500.00
TOTAL				37,500.00

RECEIVED.
BY SW DATE 12/15/16

Conditions:

1. The Agency shall impose penalty in an amount equivalent to 1/10 of one (1) percent of the total value of undelivered order for each day of the delay as liquidated damages;
2. Render your bills in triplicate copies including the original;
3. If the date of the receipt of the Purchase Order by the supplier is not indicated, it shall be deemed received on the 10th working day from the date of the approval of the Purchase Order; and
4. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts, should be submitted by the supplier.

Funds available in the amount of : P 37,500.00

SORAYAH M. SHARIEF-TABAO
FISCAL CONTROLLER IV
Head, Fund Management Section

Very truly yours,
ALLANODEN A. MACARIMBANG
Chief, Management Services Division

PRO-Admin & Membership Unit
RECEIVED BY
Date/Unit: 11/16/16-148

Attv. KHALIQUZZAMAN M. MACABATO, CPA, CSEE
Regional Vice-President

Received this P.O. Copy on: _____
by: _____

Conform: _____
Benjie Villanueva
Name & Signature of Supplier/Representative