PURCHASE UNDER

Supplier	: KIM GUAN : ILIGAN CITY				Purchase Order No. :	145-17EP 15-Nov-17
Address					Date :	
Tel/Fax					Terms of Payment :	
PR No.	7	32-17			Mode of Procuremen:	LOCAL SHOPPING
Date Date	/ /	7/2017				
Please deli	iver to this	Office with	in seven (7) working days from receipt	hereof the following:		
NO.	QTY.	UNIT	ITEM DESCR	RIPTION	UNIT PRICE T	
	16	pcs	Stamp pad felt, 60mm x 100mm, r	netal case, #1 JOY	39.50	632.00
	27	boxes	Staplewire standard, KING		25.00	675.00
	1		XXXXXNOTHING FOLLOWSXXXX	XXXXXX	-	
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	-				0212/4	
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	-					
			TOTAL			1,307.00
	_	_	TOTAL			7 - 7
the delay a 2. Render 3. If the d date of the 4. For im tax receipt	as liquidater your bills date of the eapproval aported iters, should	ed damages in triplicat receipt of t of the Purc ms, IMPOR	e copies including the original. the Purchase Order by the dealer is not it mase Order. TATION DOCUMENTS specifically so the supplier	ndicated, it shall be deemed	received on the 10th wo	orking day from the
z unus av	vie ili				0	K de la company
sle					Jonain	MACADIATRAN
0/5	-		ARIEF-TABAO gement Section 1)		Chief, Management	MACARIMBANC Services Division
Would	ricau,	I und lyred	genicin section 7//8	,	1	\W1
		1	Approved:	1.		
			Atty. KHALIQUZZA	MAN M. MACABATO, C	PA CSEE	
				gional Vice-President	I III COLLE	
						V
Received	this P.O. 0	Copy on:		Cont	form:	-

and Signature of

by: