PURCHASE ORDER

Supplier	: <u>KI</u>	M GUAN	Pt	urchase Order No. :	207-17EP	
Address	: ILI	GAN CITY			5-Dec-17	
Tel/Fax	:			erms of Payment :		
PR No.	: E19	91-17		ode of Procuremen:	LOCAL SHOPPING	
Date	: 9/2	2/2017				
Please deli	ver to this	Office with	nin seven (7) working days from receipt hereof the following:			
NO.	QTY.	UNIT	ITEM DESCRIPTION			
110.	5	pack	Tissue paper (12 rolls/pack)			
		paek	xxxxxNOTHING FOLLOWSxxxxxxxxx	150.00	750.00	
			The state of the s			
To Beautiful Control						
		L.T				
					/	
			TOTAL		750.00	
Render y If the da late of the a For imposax receipts,	riquidated your bills i te of the re approval of orted items should be lable in th	n triplicate ecceipt of the f the Purchas, IMPORT e submitted ne amount	ATION DOCUMENTS specifically showing the condition, serial number by the supplier of: Very truly yours, RIEF-TABAO	bers of the equipment o	ing day from the	
			Regional Vice-President			
eceived thi	is P.O. Con	nv on:				

by: