Cell Phone No. 09285071910; Fax No. 09209372263

## PURCHASE ORDER

VIZMASTER COMP.SALES AND SERVICES CORP.	Purchase Order No.
igan City	Date / 1 7 APR 2018
	Terms of Payment :
-015-18	Mode of Procuremen: LOCAL SHOPPING
/8/2018	
	rigan City  1015-18 10/8/2018

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

NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUN
1	1/	cart	Flash drive/Thumb drive (high capacity storage)	1,795.00	1,795.00
			xxxxxxxx nothing follows xxxxxxxx		
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				3 H I I sig	E E Je L
				A H Barta	
	13.04			18-05-02	19
				10 00 00	
				E HILLIE	
			TOTAL		1,795.0

Co	nd	liti	on	IS:

Received this P.O. Copy on:

- 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.

	is not indicated, it shall be deemed received on the 10th working day from the
date of the approval of the Purchase Order.	
4. For imported items, IMPORTATION DOCUMENTS specifi	ically showing the condition, serial numbers of the equipment purchased, and
tax receipts, should be submitted by the supplier	
Funds available in the amount of: 1,795. W	. Very truly yours,
SORAYAH M. SHARIEF-TABAO Head, Fund Management Section	ALLANODEN A. MACARIMBANG Chief, Management Services Division
Approved:  Atty: KHALIO	hi Janan Magabato, CPA, CSEE
	Regional Vice-President
Paceived this P.O. Conv. on:	Conform: