Cell Phone No. 09285071910; Fax No. 09209372263

## PURCHASE ORDER

supplier	: KIN	GUAN			Purchase Order No. :	1 8 - 0 9 6
Address	: Iliga	an City			Date :	2 8 MAY 2018
Γel/Fax	: 4				Terms of Payment :	
PR No.	: 080	-18			Mode of Procuremen:	LOCAL SHOPPING
Date	: 2/1/	2018	1/18/18			
Please deli			in seven (7) v	working days from receipt hereof the following:	18=07	-0166
NO.	QTY.	UNIT		ITEM DESCRIPTION		TOTAL AMOUN
1	/11	pcs	TISSUE RO	OLL PACK 2 Ply (12 Rosss)	150.00	1,650.00
	/		XXXX	xxxxx nothing follows xxxxxxx	-	
				8		
						100
			1			
			7			
	-					
			1995			
					NY by	
7						
	1 - 1	No.	ALG DIES			
	100777			Manual Colors		
		- 10-0-2		EARMAH R. WALLES		
				The Arms of the Control of the Contr		
						1 (50 00
				TOTAL		1,650.00
the delay at 2. Render 3. If the date of the 4. For im tax receip	gency shall as liquidate r your bills date of the e approval aported iter ts, should b	ed damages in triplicate receipt of the of the Purch ms, IMPOR	he copies include he Purchase Ohase Order. TATION DO	nount equivalent to 1/10 of one (1) percent of the to ding the original.  Order by the dealer is not indicated, it shall be deem CUMENTS specifically showing the condition, serier	ned received on the 10th we	orking day from
ed-Supplets	SORAY	AH M. SH	ARIEF-TABA gement Section	AO WI	ALLANODEN A. Chief, Managemen	
elle co	21/16		Арргоч	C TIMIN	o, CPA, CSEE	
				Regional Vice-President		
Received	this P.O. C	Copy on:			Conform:	