airing Diug., Cong. Cell Phone No. 09285071910; Fax No. 09209372263

## **PURCHASE ORDER**

NO.	Lor	y. I UNIT I	ITEM DESCRIPTION	UNIT PRICE TOTAL AMOUNT		
Please deli	ver to t	this Office within sever	(7) working days from receipt hereof the following	18-09-0130		
Date : 1/8/2018				40.00.0400		
PR No.	: 1	B-01818		Mode of Procuremen: LOCAL SHOPPING		
Tel/Fax	: _			Terms of Payment :		
Address	: '1	Iligan City		Date : 0 0 A00 2010		
Supplier	: ]	LIGAN DATAVISION	SALES CENTER	Purchase Order No. :		
2/1/2				18-190		

NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	4	unit	Mouse Optical, USB Connection type with unit scroll wheel&	290.00	1,160.00
			left & right clicl button (A4 Tech)		^
			xxxxxxxx nothing follows xxxxxxxxxxx		
				The state of the s	
1					
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
· V			W. S.		
					/
			TOTAL		1,160.00

## **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 dealer 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 specifically showing the condition, serial numbers of the equipment purchased, and

i. To imported items, in order	
tax receipts, should be submitted by the supplier	
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	XI AI

Very truly yours, Funds available in the amount of: RIEF-TABAO

Chief, Management Services Division Head, Fund Management Section

> Approved: CABATO, CPA, CSEE

Regional Vice-President

Received this P.O. Copy on;

Conform:

