## **PURCHASE ORDER**

	KIM GUAN	Purchase Order No. :
Address :	Iligan City	Date : 1 7 AUG 2018
Tel/Fax :		Terms of Payment :
PR No. :	306-18	Mode of Procuremen: NP/SVP
Date :	5/8/2018	10 00 0004

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

NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUN
		PACK	MEDICAL SUPPLIES TISSUE 2 PLY	150.00	750.00
	/		xxxxxxxnothing follows xxxxxxxxx		
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			Comptrollership Unit		
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## **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 tax receipts, should be submitted by the supplier

Funds available in the amount of:

790-

Very truly yours,

ALLANODEN A. MACARIMBAN

118-217

18-09-0221

Chief, Management Services Division

SORAYAH M. SHARIEF-TABAO
Head, Fund Management Section

Approved:

Atty. KHALIQUZZAMAN M. MACABATO, CPA, CS

Regional Vice-President

Received this P.O. Copy on:

Conform: