| Supplier | | CROWN PAPER & STATIONER | Purchase Order No. : 18 - 4 2 2 |
|----------|---|-------------------------|------------------------------------|
| Address | | ILIGAN CITY | Date : |
| Tel/Fax | | ILIGIAN OFF | Terms of Payment 1 2 DEC 2018 |
| PR No. | : | PR-036-18 | Mode of Procuremen: local shopping |
| Date | | 8/14/2018 | |

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

| NO | OTV I | UNIT | ITEM DESCRIPTION | UNIT PRICE | TOTAL AMOUN |
|-----|-------|------|--|------------|-------------|
| NO. | QTY. | | BALLPOINT PEN Fine point, Blue, UNI | 6.50 | 455.00 |
| 1 | 70 | pcs | STICK-ON NOTE PAD 50mm x 76mm (2x3), 70gsm (min.), | 25.00 | 200.00 |
| 2 | 8 / | pcs | 100 sheets per pad | - | |
| | 20 | | BALLPOINT PEN Fine point, Black, UNI | 6.50 | 130.00 |
| 3 | 20 / | pcs | XXXXXNOTHING FOLLOWSXXXXXXXXXX | | |
| | | | XXXXXNOTHING FOLLOW SXXXXXXXXXXX | | |
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| | | | TOTAL | 7. | 785.0 |

- 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. | Il he deemed received on the 10th working day from the |
| Render your bills in triplicate copies including the original. If the date of the receipt of the Purchase Order by the dealer is not indicated, it sha | all be deemed received on the roth working any months |
| date of the approval of the Purchase Order. 4. For imported items, IMPORTATION DOCUMENTS specifically showing the continuous specifically specifically showing the continuous specifically specifically showing the continuous specifically specifica | |
| tax receipts, should be submitted by the supplier | |
| Funds available in the amount of: | Very truly yours, |
| · | Computer MACARIMBANG |
| SORAYAH M. SHARIEF-TABAO | ALLANODEN A. HACARINDANO |
| Head, Fund Management Section | Chief, Management Services Division |
| Approved: | D mle |
| Atty. KHALIQUZZAMAN M. MA | ACABATO, CPA, CSEE |

Conform: Received this P.O. Copy on: Name and Signature of

Regional Vice-President