Cell Phone No. 09285071910; Fax No. 09209372263

## **PURCHASE ORDER**

Supplier	:	ILIGAN DATAVISION SALES CENTER		Purchase Order No. :	19-118
Address	:	ILIGAN CITY	200000000000000000000000000000000000000	Date	5-10-2019
Tel/Fax	:			Terms of Payment	Inal (Troping)
PR No.	:	220-19		Mode of Procurement :	
Date	: 7	4/30/2019	61		V
Please del	iver t	to this Office within seven (7) working days from	m receipt hereof the following:		

NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUN
1	30	cart	HP LASERJET 37a black	10,295.00	308,850.00
2	6	cart	HP LASERJET 48a black	3,350.00	20,100.00
			XXXXX NOTHING FOLLOWS XXXXXX		
				7	
	1 2 3	1			
		ua la	TOTAL		328,950.00

## **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.
- Render your bills in triplicate copies including the original.
  If the date of the receipt of the Purchase Order by the dealer

	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	
R 27 8 (17)	
Funds available in the amount of:	Very truly yours,
	very duly yours,
891	for manufant V/14
ACLINALI DI CHADY	
ASLINAH D. ASHARY	ALLANODEN A. MACARIMBANG
Head, Fund Management Section	Chief, Management Services Division
TSMP	
Approved:	1. 00
	Minus other.
Dr. SA	INUDDIN M. MOTI
Acting F	Regional Vice-President
/ Noting /	yegional vice i resident
Received this P.O. Copy on:	Conform
	Conform:
by:	$\mathcal{A}_{\mathcal{A}}$
	Name and Signature of
	Supplier/Representative