Supplier	:	CROWN PAPER AND STATIONER	Purchase Order No. :	19-25+
Address	:	ILIGAN CITY	Date :	7-19-1019
Tel/Fax	:		Terms of Payment :	quito
PR No.	:	035-19	Mode of Procurement:	NP/SVP
Date	:	1/24/2019		
		The second secon		

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

NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUN
1	12/		Medical Supplies Alcohol 500ml, 68%-72% Ethanol Alcohol	75.00	900.00
			(Green Cross)		
			XXXXXX NOTHING FOLLOWS XXXXXXX		
		1			
		1			
		-			
				32/1/8	
			T 0 T 1 I		900.00
		v	TOTAL		900.00

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 receive	red on the 10th working day from the
date of the approval of the Purchase Order.	are of the equipment purchased and
4. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers	bers of the equipment purchased, and
tax receipts, should be submitted by the supplier	
Funds available in the amount of: Very truly yours,	
Tunus available in the amount of.	()
	The state of the s
	LANODEN A. MACARIMBANG
Head, Fund Management Section	nief, Management Services Division
RAKS	
Approved:	
Approved: Jose, Doranto 8/8/19 ATT KHALIQUZZAMAN M. MACABATO, CPA, CSEE	
REGIONAL VICE-PRESIDENT	
Received this P.O. Copy on: Conform:	1
by:	
	9
	Name and Signature of
	Suppler/Representative