Supplier	:	HI-12 APPLIANCE MARKETING & SERVICE CENTER	Purchase Order No. : [9-27	210/
Address	:	IŁIGAN CITY	Date : Study 24	
Tel/Fax	:		Terms of Payment :	
PR No.	:	115-19	Mode of Procuremen: NP/SVI	,
Date	:	2/21/2019		
Please de	liver	to this Office within seven (7) working days from receipt hereo	f the following:	OMN

NO.	QTY.	UNIT	ITEM DESCRIPTION		TOTAL AMOUN
1	2/	unit	AIRCON 220V Single Phase, SPLIT TYPE, 1.5hp	85,000.00	170,000.00
1	7	CHIL	COOLING CAPACITY INVERTER TYPE WITH		
			REMOTE CONTROL AND HAS HIGHEST POWER		
			SAVINGS COMPLETE WITH STD ACCESSORIES,		
			220V,1PH,60H.,with Installation.		
1			Including installation		
			Free labor and materials and transportation of units to marawi		
		1	CARRIER BRAND, High End		
	-		Warranty: 1 year parts & services		
			5 years compressor		
			XXXXXX NOTHING FOLLOWS XXXXXXX	100	1
				400	
			19=03=	192	
		- 1			170 000 (
			TOTAL		170,000.0

	ons:

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. For imported items, IMPORTATION DOCUMENTS specifical ax receipts, should be submitted by the supplier	lly showing the condition, serial numbers of the equipment purchased, and
Funds available in the amount of:	Very truly yours,
ASLINAH D. ASHARY, CPA OIC, FUND MANAGEMENT SECTION	ALLANODEN A. MACARIMBANG Chief, Management Services Division
Approved: Approved: Atty. KHALIQU	ZZAMAN M. MACABATO, CPA, CSEE Regional Vice-President
Received this P.O. Copy on:by:	Conform: Name and Signature of

Supplier/Representative