## PURCHASE ORDER

		TN CITA	N EDNO O GRODEON COTER		
Supplier		NC.	AN EDUC.& SPORTSMASTER	Purchase Order	: 2v27-05
Address	: I	LIGAN C	CITY	Date	FU 2012
Tel/Fax				Terms of Payme	
PR No.		18II-10	2-2023	Mode of Procure	The state of the s
	_	/25/20		Mode of Frocur	- Adjort
Date	: 4	135/20	023		
Please del	iver to thi	office v	within seven (7) working days from receipt hereof the following:		
NO.	QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	1408	box	MEDICAL/SURGICAL FACE MASK, 3 ply (Adelai brand)	75.00	105,600.00 /
	- 1	20.00	XXXX NOTHING FOLLOWS XXXX		
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100		Maria Co	M - MATTER -		
			Receiveday		
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		124			1
156-11			TOTAL		105,600.00
2. Rende 3. If the working 4. For in purchase	er your bi e date of day from mported ed, and ta	lls in trip the rece the date items, II x receipt	s liquidated damages. blicate copies including the original. ipt of the Purchase Order by the dealer is not indicated, of the approval of the Purchase Order. MPORTATION DOCUMENTS specifically showing the cons, should be submitted by the supplier  Mount of:  Wery truly	dition, serial numbers y yours,  ALLANODEN	pers of the equipment
			agement Section	Chief, Manager	nent Services Division
			Approved:  DATU MASIDING M. ALONTO, J.I.  Regional Vice President	<u>R.</u>	7
Dogging 4	thic D O	Conve	Con	nform:	
Received	this P.O	by:			Signature of
					Representative
				1	