PURCHASE ORDER

Department of Social and Welfare and Development

Supplier Name: DYSEKCO ENTERPRISES CORPORATION

Field Office Region XIII CARAGA Purchase Order No.: 23-02-0106

Please furnish this office the following articles subject to the terms and conditions contained herein. Place of Delivery: Page of Delivery: Date of Delivery: Payment Term: Payment	Address: TIN: PhilGEPS No.: _				Date: Mode of Procurement:		2023-02-21 NP Small Value Procurement	
Place of Delivery: Date of Del	Gentlemen Ple	ease furnish this	office the following articles subject to the terms and	conditions cor	ntained herein			
## Unit Description Quantity Unit Cost Total Cost 1 PC/S Fram Sponge Diswashing 2 PC/S Other Supplies Hangers w/o clips, good quality 60.00 110.00 110.00 600.00 3 SET Flore Map Tomado Map Set with Bucket 100.00 9500.00 9,300.00 5 PC/S Spoon durable 100.00 10.00 10.00 1.000.00 5 PC/S Fork durable 100.00 10.00 1.000.00 1 PC/S First Semester 2023* FOURTEEN THOUSAND NINE HUNDRED TWENTY PESOS ONLY 1071AL 14,920.00 1 In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed. Very truly yours, Signature Over Printed Name of Supplier Signature Over Printed Name of Authorized Official Begional Director Designation Public Publi	Place of Delivery:				Delivery Term:		Receipt of Approved P.O. Within 30 Working Days After	
1 PC/S Foam Sponge Diswashing 140.00 18.00 2,520.00 2 PC/S Other Supplies - Hangers w/o clips, good quality 60.00 10.00 600.00 3 SET Flore Mop Tomado Mop Set with Bucket 100.00 980.00 9,800.00 4 PC/S Spoon durable 100.00 10.00 1,000.00 5 PC/S Fork durable 100.00 10.00 1,000.00 1 PC/S First Semester 2023** FOURTEN THOUSAND NINE NUMBED TWENTY PESOS ONLY 707AL 14,920.00 1 In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed. Very truly yours, Signature Over Printed Name of Supplier Signature Over Printed Name of Authorized Official Beneficial Director. PUM D Signature Over Printed Name of Supplier Date Signature Over Printed Name of Chief Accountarylyted of the secondarylyted of Polymory Responsibility Conterts: Date Signature Over Printed Name of Chief Accountarylyted of Percounting Division/Unit Signature Over Printed Name of Chief Accountarylyted of Percounting Division/Unit Name of Percounting Divisi	,				dyment term.			
2 PC/S 3 SET Hoor Mop Tornado Mop Set with Bucket 10.00 \$98.00.0 \$9.800.00 5 PC/S 5 Pond durable 100.00 10.0	#	-	Description			Quantity	Unit Cost	Total Cost
3 SET Floor Mop Tornado Mop Set with Bucket 10.00 98,00.00 9,800.00 10.0						140.00	18.00	2,520.00
4 PC/S Speon durable 100.00 10.00 1,000.00 10.00 1,000.00 10.00 1,000.00 10.00 1,000.00 10.00 10.00 1,000.00 10.00						60.00	10.00	600.00
Total Amount in Words Fourteen thousand nine hundred or accounting Division/Unit Total								9,800.00
(Total Amount in Words) FOURTEEN THOUSAND NINE HUNDRED TWENTY PESOS ONLY In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed. Very truly yours, Signature Over Printed Name of Supplier Pund Cluster: A Date ORS (Supplier Or Printed Name of Authorized Official Regional Director Designation Or Segmentary Or Or Segment Or						100.00	10.00	1,000.00
(Total Amount in Words) FOURTEEN THOUSAND NINE HUNDRED TWENTY PESOS ONLY In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed. Conforme: Wery truly yours, Signature Over Printed Name of Supplier Date Dote Fund Available: Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit Available: Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit Available: Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit Available: Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit Available: Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit Available: Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit Available: Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit Available: Signature Over Printed Name of Chief Accountant/Head of Acco	5	PC/S	Fork durable			100.00	10.00	1,000.00
In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed. Very truly yours, MARI- FLOR A. DOLLAGA- LIBANG Signature Over Printed Name of Supplier Signature Over Printed Name of Authorized Official Regional Director Designation DV No.: 27:01:111 ORS/BURS No.: 27:01:131 DATE: Source of Funds: ORS/BURS No.: 27:01:131 UACS Code: ORS/BURS No.: 27:01:141 UACS CODE: ORS/BURS NO.: 27:0			OFFIGE OF THE PORTS OF THE PORT	old and Toilet	tries Supplies,			
Conforme: Warning War	(Total Amo	unt in Words)	FOURTEEN THOUSAND NINE HU	NDRED TWENT	TY PESOS ONLY		TOTAL	14,920.00
Regional Director Designation Fund Cluster: Fund Available: Fund Available: Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit CRESCORD Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit Amount: Regional Director Designation Designation Designation		1	man on	ery truly yours	, MARI- FL	OR A. DOLLAG	A- LIBANG	
Fund Cluster: DV No.: Date: Date:			2/28/2023			Regional Directo		
Fund Available: ORS/BURS No.: 27.64.131 Date: Source of Funds: ORS/BURS No.: 27.64.131 Date: ORS/BURS No.: 27.64.131 Date: ORS/BURS No.: 27.64.131 Date: ORS/BURS No.: 27.64.131 Date: Date: Date: Date: Date: Date:	Fund Cluster:	la	Date	7	DV No.: 27:02		Date:	
	Fund Available:			on/Unit	ORS/BURS No.: Source of Funds	101 101 100	Date:	
	This gaency of	adheres to "NO G	FIFT ALLOWED" policy pursuant to the provision of R.A.	6713 known a				olic Official and

Employees.

^{**} To track your Voucher/Payment you my text in the following PO [SPACE] PURCHASE ORDER NUMBER and send to 09560847559 **