PURCHASE ORDER

Department of Social and Welfare and Development

		Field Office Region XIII CA	ARAGA				
0.00				Purchase Order No.:		23-07-1119	
Address:	¥			Date:		2023-07-07	
TIN: PhilGEPS No.: _			Mode of Procurer	Mode of Procurement:		Shopping	
Gentlemen							
40 - 10 -	ease furnish th	is office the following articles subject to the terms and condit	ions contained herein.				
Place of Delivery: <u>DSWD Caraga Regional Office, Capitol Site, Butuan City</u>			Delivery Term:	Delivery Term:		Within 30 Calendar Days After Receipt of Approved P.O. Within 30 Working Days After	
Date of Delivery	y :		Payment Term:		the Inspection and	Acceptance	
#	Unit	Description		Quantity	Report is received Unit Cost	Total Cost	
1	REAM/S	Bond Paper Legal, 80gsm		17.00		4,505.00	
2	PC/S	Notebook Stenographer		2800.00		41,300.00	
	, 5,5	Notebook Stellographer		2.000.00	14.75	42,300.00	
		10000000000000000000000000000000000000					
						additioner of	
			COM	MISSION	ON AUDIT		
	ACC	CUNTING SECTION	0.551	DSWD FO			
	MA PE		OFFIC	E OF THE	AUDITOR		
-	DI	DATE: 7/11/27	R		VED		
	Land A Maria	7.00		13 /23			
4 4 74	-	and the second second	DATE:	POWER DESCRIPTION DESCRIPTIONS	LKAE:		
1 32			BY:				
		"Training Supplies: MATERIALS FOR MUNICIPAL TRA ON THE CONDUCT OF PARTICIPATORY BARANGA	100 100 10 10 10 10 10 10 10 10 10 10 10				
		PLANNING"	T DEVELOT WENT				
(Total Amo	unt in Words)	FOURTY-FIVE THOUSAND EIGHT HUND	RED FIVE PESOS ONLY		TOTAL	45,805.00	
In case of f	ailure to make	the full delivery within the time specified above, a penalty of o	ne-tenth (1/10) of one pe	rcent for every	day of delay shall be	imposed.	
Conforme:		Very trui	ly yours,				
	IN	(eld 9 T, tamayo		Lund	A LIDANG		
	Signatur	e Over Printed Name of Supplier	MARI- FLC Signature Over Pr		A- LIBANG Authorized Official		
		7-12-77		Regional Directo			
Free d Classics	61	Date	m	Designation	7/0/2	2	
Fund Cluster: _	U/		DV No.: (2/0)	1-8J26	Date: 7/8/0	1/22	
Fund Available:	•		ORS/BURS No.: 2 Source of Funds:	1 1 - 1	Mate: +/1	40	
		GRETCHEN FERNANDEZ ESCALA	UACS Code:	f02030	Im		
Signatu	ure Over Printe	d Name of Chief Accountant/Head of Accounting Division/Unit	4	nter: 000	16-01-01-8	nor	
This	udhana tu Hara	CUTT ALL QUIETE II -	Amount:	12/2W.		250	
inis agency a	aneres to "NO	GIFT ALLOWED" policy pursuant to the provision of R.A 6713 k	nown as the Code of C <mark>d</mark> no	nuct and Ethical	Standards for Public	c Official and	

Employees.

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