## **PURCHASE ORDER**

Department of Social and Welfare and Development Field Office Region XIII CARAGA

Supplier Name: COMPANERO COMMERCIAL Address: Lopez Jaena St., Butuan City, Agusan del Norte TIN: PhilGEPS No.:				Purchase Order No.: Date: Mode of Procurement:		23-07-1121 2023-07-07 Shopping	
Gentlemen			4 - 4	ntoined barata			
Please furnish this office the following articles subject to the terms and conditions contained he  Place of Delivery:  DSWD Caraga Regional Office, Capitol Site, Butuan City  Delivery:						Within 30 Calend	
Date of Delivery:			Payment Term:			Within 30 Working Days After the Inspection and Acceptance Report is received	
#	Unit	D	escription		Quantity	Unit Cost	Total Cost
1	PC/S	Cartolina Paper (Assorted Color)Light colors			400.00	5.50	2,200.00
2	вох	Envelope (Expanding, Kraftboard, Legal size)			30.00	1,450.00	43,500.00
3	вох	Marker (for whiteboard - Black)			50.00	300.00	15,000.00
4	вох	Marker (for Whiteboard) Blue			20.00	300.00	6,000.00
5	вох	Marker (for Whiteboard) Red			20.00	300.00	6,000.00
6	вох	Marker (Permanent, Bullet type, black)			185.00	300.00	55,500.00
7	вох	Marker (Permanent, Bullet type, blue)			60.00	300.00	18,000.00
8	PC/S	Ballpoint Pen (Black)			2800.00	5.50	15,400.00
9	PC/S	Pencil Lead with earaser			100.00	5.00	500.00
10		Transparent Tape (48mm x 50m)			19.00	45.00	855.00
	ROLL/S				15.00	50.00	750.00
11	PC/S	Scissors Meta Cards (Cartolina) size: half of A4 (assorted colrs) yellow, neon orange, light			10000 00	1.00	10,000.00
12	PC/S	blue, light pink, mint green or any light colors)			10000.00	1.00	10,000.00
13	вох	CANON LAID Paper Short			7.00	875.00	6,125.00
14	PC/S	ID Holder ID JACKET (PORTRAIT)			2800.00	7.00	19,600.00
15	PC/S	Lanyard			2800.00	6.00	16,800.00
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	ACCOU	"Training Supplies: MATERIALS ON THE CONDUCT OF PARTIE	OMMISSICE DSWD OFFICE OF T  RESERVED DATE: 7   140   70   DATE: 7   140	FO XIII HE AUDITO TO THE STATE			
(Total Amount in Words) TWO HUNDRED SIXTEEN		THOUSAND TWO HUNDRE	D THIRTY PESOS O	NLY	TOTAL	216,230.00	
In case  Confort	Signature	HANICE RANNOS  Over Plinted Name of Supplier  1/24/23  Date	above, a penalty of one-tent	MARI- FLO Signature Over Pr 2 E	DR A. DOLLAG inted Name of A Regional Director Designation	A- LIBANG Authorized Official or Date:	pe imposed.
Fund Avail		GRETCHEN FERNANDEZ ESCALA  I Name of Chief Accountant/Head of Accounta	counting Division/Unit	ORS/BURS No.: _ Source of Funds: UACS Code: Responsibility Ce	2 WOODIN	1/2 / 1/2 /	02
		(	7/2	Amount:	216,23	V· W	