## **PURCHASE ORDER**

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

Figure (Total Amount in Words)  Time 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,  Figurature Description  Confirme:  Where the following articles subject to the terms and conditions contained herein.  Deswer to the livery:  DEWD Carasea Regional Office, Capitol Site, Bubbana City  Description  Descript	upplier Name: Address: IN: PhilGEPS No.:	CITIHARDWARE BACOLOD INC. KM 3 Brgy Baan KM 3, Butuan City 005-919-438-016		Purchase Order No.: Date: Mode of Procurement:		23-09-1436 2023-09-01 NP Small Value Procurement	
The of Delivery:    District of Delivery:			425				
Page of Delivery:    Page   Unit   Description   Quantity   Unit Cost   Total Cost	Ple	ease furnish this	office the following articles subject to the terms and conditions	contained herein.			
Unit   Description   Quantity   Unit Cost   Total Cost					Check on Delivery		
Trace 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-FIORA AUGUSTERS OF Supplier Supp		:		Payment Term:			l.
Total Amount in Words)  The Sequire and Maintenance of Dormitory Water Supply and Plumbing Equipment*  "Repair and Maintenance of Dormitory Water Supply and Plumbing Equipment*  The Sequire of failure to make the full delivery within the time specified above, a penaltry of one-tenth (1/10) of one percent for every day of delay shall be imposed.  Very truly yours,  Water For August 1 (1/10) of one percent for every day of delay shall be imposed.  Very truly yours,  Water For August 2 (1/10) of one percent for every day of delay shall be imposed.  Very truly yours,  Signature Dover Printed Name of Supplier  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Signature Over Printed Name of Chief Accommant/Head of Accomming Division/Unit  Amount: 1/2, 3740	#	Unit	Description		Quantity	Unit Cost	Total Cost
TWENTY-EIGHT THOUSAND SEVEN HUNDRED SEVENTY-SIX 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,  WARL-FLOR A. WORLD SIGNAL USANG  Signature Dover Printed Name of Supplier  GRETCHEN FERNANDEZ ESCALA  Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit  Reposition Division/Unit  ONE OF STATE ALIDANG  Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit  Reposition Division/Unit  ONE OF STATE ALIDANG  Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit  Reposition Division/Unit  Reposition Division/Unit  ONE OF STATE ALIDANG  Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit  Reposition Division/Unit  Reposition Division/Unit  ONE OF STATE ALIDANG  Responsibility Center, Ref. (2) 1 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1	set/s	Tank Pressure tank 42 gallons GP-42 G.1		2.00	4,499.00	8,998.00
**Repair and Maintenance of Dormitory Water Supply and Plumbing  **Equipment**  **Repair and Maintenance of Dormitory Water Supply and Plumbing  **Equipment**  **TAS:  **Y:  **TAS:	2	set/s	Tank Pressure tank 21 gallons PG-21 G.1		2.00	2,599.00	5,198.00
(Total Amount in Words)  ":Repair and Maintenance of Dormitory Water Supply and Plumbing Equipment"  Total Amount in Words)  TWENTY-EIGHT THOUSAND SEVEN HUNDRED SEVENTY-SIX PESOS ONLY  TOTAL 28,776.00  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,  Wary truly yours,  Signature Over Printed Name of Supplier  Beginnature Over Printed Name of Supplier  Signature Over Printed Name of Supplier  ON No. 12-07-1/18*U  ORS/BUSN No. 13-07-1/10-10  ORS/BUSN NO	3	PC/S	Other Supplies Hose bidet Aloy		20.00	275.00	5,500.00
(Total Amount in Words)  TWENTY-EIGHT THOUSAND SEVEN HUNDRED SEVENTY-SIX 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,  MARI-FLOR A. 2004 GA- LIBANG  Signature Over Printed Name of Supplier  Date  ORS/BURS No. 24-04-1017  Source of Funds:  ORS/BURS No. 24-04-1017  Date:  ORS/BURS NO. 24-04-1017	4	PC/S	Floor Drain filter mesh basket Aluminum		40.00	227.00	9,080.00
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. DOUNGA- LIBANG			CFFICE OF THE AUDIT	OR			
Conforme:    Conforme	(Total Amou	unt in Words)		ENTY-SIX PESOS ON	ILY	TOTAL	28,776.00
DV No.: 14-09-1394   Date:   ORS/BURS No.: 24-09-1394   Date:   ORS/BURS No.: 24-09-1394   Date:   Source of Funds:   I O   UACS Code:   Solid Old Old Old Old Old Old Old Old Old Ol	In case of fa	JANE CO	refull delivery within the time specified above, a penalty of one-te  Very truly you  Delicate  Diver Printed Name of Supplier	nth (1/10) of one pe irs, MARI- FL Signature Over Pi	DR A. 500 AGA	lay of delay shall b A- LIBANG uthorized Official	
Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit  ORS/BURS No.: 14-6-11017 Source of Funds: 10   UACS Code: 15-11 0   Responsibility Center: 10   Amount: 18-170	und Cluster:	[0]	Date	DV No.: 24.09		Date:	
Amount: 18, 770			GRETCHEN FERNANDEZ ESCALA	ORS/BURS No.: _ Source of Funds: UACS Code: 51	19 04001	Date:	
			9/5	Amount:	18,770		lic Official and

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