

**PURCHASE ORDER**

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

Supplier Name: <b>NAHARO BUILDERS, INC.</b>	Purchase Order No.: <b>23-12-2156</b>
Address: <b>Golden Millenium Motor Sales, J.C. Aquino Avenue, Bayanihan, Butuan City</b>	Date: <b>2023-12-12</b>
TIN: _____	Mode of Procurement: <b>NP Small Value Procurement</b>
PhilGEPS No.: _____	

**Gentlemen**  
Please furnish this office the following articles subject to the terms and conditions contained herein.

Place of Delivery: <b>RRCY, Patin-ay, Agusan Del Sur</b>	Delivery Term: <b>As Per Book Schedule After Receipt of Approved P.O.</b>
Date of Delivery: _____	Payment Term: <b>As Per Billing</b>

#	Unit	Description	Quantity	Unit Cost	Total Cost
1	CU.M.	Excavation of Footing	51.98	305.43	15,876.25
2	CU.M.	Backfilling of Excavated Materials	42.56	248.57	10,579.14
3	CU.M.	Structural Concrete Structural Concrete(Class "A") 21 mpa	7.48	11,435.49	85,537.47
4	KG/S	Reinforcing Steel (Grade 40)	635.56	84.32	53,590.42
5	SQ.M	Forms and Falseworks	21.08	818.40	17,251.87
6	SQ.M	Pre-painted Metal Roofing	55.80	909.24	50,735.59
7	SQ.M	METAL WORKS Painting	36.27	411.32	14,918.58
8	KG/S	Structural Steel Roof Framing Truss(G.I Pipe Sched 40)	1738.65	131.59	228,788.95

**COMMISSION ON AUDIT  
D SWD FO XIII  
OFFICE OF THE AUDITOR  
RECEIVED**

DATE: 12/19/23 TIME: \_\_\_\_\_  
BY: \_\_\_\_\_

" : Proposed Construction of RRCY Parking Shades (3 Bay/4 post)"

(Total Amount in Words)	<b>FOUR HUNDRED SEVENTY-SEVEN THOUSAND TWO HUNDRED SEVENTY-EIGHT PESOS AND 27/100</b>	<b>TOTAL</b>	<b>477,278.27</b>
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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: **Very truly yours,**

Shanna Athani Simon  
Signature Over Printed Name of Supplier  
Date: 12/19/23

MARI-FLOR A. DOLLAGA- LIBANG  
Signature Over Printed Name of Authorized Official  
Regional Director

Fund Cluster: _____	DV No.: <u>2023-18256</u> Date: <u>12/12</u>
Fund Available: _____	ORS/BURS No.: <u>23-18256</u> Date: <u>12/15</u>
<u>GRETCHEN FERNANDEZ ESCALA</u> Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit Date: <u>12/16</u>	Source of Funds: <u>101</u>
	UACS Code: <u>000000099</u>
	Responsibility Center: <u>00016-01-00 00-0</u>
	Amount: <u>477,278.27</u>

This agency adheres to "NO GIFT ALLOWED" policy pursuant to the provision of R.A 6713 known as the Code of Conduct and Ethical Standards for Public Official and Employees.

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