

8/14/24, 3:29 PM

PURCHASE ORDER

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

Supplier Name: Berry Happy Mart	Purchase Order No.: 24-08-1331
Address:	Date: 2024-08-14
TIN:	Mode of Procurement: NP Small Value Procurement
PhilGEPS No.:	

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

Place of Delivery: DSWD Caraga Regional Office, Capitol Site, Butuan City	Delivery Term: Within 15 Working Days After Receipt of Approved P.O.
Date of Delivery:	Payment Term: Within 30 Working Days After the Inspection and Acceptance Report is received

#	Unit	Description	Quantity	Unit Cost	Total Cost
1	PC/S	Albatros (Big, with Holder) 50g assorted - LEMON	50.00	55.00	2,750.00
2	GALLON	Muriatic Acid - APOLLO	5.00	357.00	1,785.00
3	GALLON	Bleach 3.785L/Gallon - ZONROX	10.00	188.00	1,880.00
4	KL/S	Chlorine	10.00	93.00	930.00
5	PACK/S	Fabric Conditioner 1.38L - DEL	20.00	165.00	3,300.00
6	PC/S	Other Supplies Anti-Dengue Mosquito Killer 330g - PEST OFF	10.00	286.00	2,860.00
7	Bot	Other Supplies Conditioner 180ml - CREAMSILK	60.00	174.00	10,440.00
8	PC/S	Foam Sponge	30.00	15.00	450.00
9	CASE/S	Tissue Paper 96rolls/case - JOY	5.00	1,440.00	7,200.00
10	BOTTLE/S	Other Supplies Shampoo, 200ml - SUNSILK	30.00	156.00	4,680.00
11	BOTTLE/S	Other Supplies Baby Cologne 125ml - BABYFLO	60.00	74.00	4,440.00
12	BOTTLE/S	Lotion (500ml) - SKIN WHITE PAPAYA	60.00	388.00	23,280.00
13	PC/S	Other Supplies deodorant deonat spray - NIVEA	60.00	240.00	14,400.00
14	BOTTLE/S	Toilet Bowl Cleaner 900ml/bottle - GREENEX	20.00	158.00	3,160.00
15	CASE/S	Sanitary Napkins 24pcs/case - SISTERS	3.00	900.00	2,700.00
(Total Amount in Words) EIGHTY-FOUR THOUSAND TWO HUNDRED FIFTY-FIVE PESOS ONLY			TOTAL	84,255.00	

COMMISSION ON AUDIT
OF THE REGIONAL OFFICE OF THE AUDITOR
RECEIVED
DATE: 8/20/2024
BY: [Signature]

"Subsidies Expense: HFG Resident's Toiletries Supplies, August-September 2024"

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,**

[Signature] **For the Regional Director:**
MARI-FLORENTINA A. DOLLAGA-LIBANG
Signature Over Printed Name of Authorized Official
Regional Director
Designation

Fund Cluster: 101
Fund Available: _____

[Signature]
GRETCHEN FERNANDEZ ESCALA
Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit

DV No.: 24-08-12025 Date: 8/15/24
ORS/BUFS No.: 24-08-11123 Date: 8/15/24
Source of Funds: 101
UACS Code: 5021499000
Responsibility Center: 00016-01-01-01-02-02
Amount: 84,255

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 ****