

PURCHASE ORDER

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

Supplier Name: EJ AND JY WET MARKET AND ENTERPRISES	Purchase Order No.: 24-07-1157
Address: POBLACION, CARMEN, AGUSAN DEL NORTE	Date: 2024-07-19
TIN: 175-846-963-000	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: Home for Girls, Bonbon, Butuan City.	Delivery Term: WEEKLY after receipt of approved PO until fully delivered
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	KL/S	Pork Meat	80.00	350.00	28,000.00
2	KL/S	Chicken Meat - MANOK PINOY	80.00	195.00	15,600.00
3	KL/S	Ground Pork	25.00	340.00	8,500.00
4	KL/S	Hotdog - PUREFOOD	50.00	235.00	11,750.00
5	KL/S	Fish (Fresh) - YELLOW FIN	50.00	320.00	16,000.00
6	PACK/S	Tocino pork - VIRGINIA	20.00	140.00	2,800.00
7	DOZEN	Chorizo	20.00	40.00	800.00
8	PACK/S	Ham - WINNER	20.00	135.00	2,700.00
9	PACK/S	Other Supplies Longganisa - PORK DAVAO	20.00	60.00	1,200.00
				TOTAL	87,350.00

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

DATE: 8/8/2024 TIME: _____
BY: [Signature]

": Food Supplies Expense: HFG Resident's Consumption (Wet Goods),
August- September 2024"

(Total Amount in Words) **EIGHTY-SEVEN THOUSAND THREE HUNDRED FIFTY PESOS ONLY** **TOTAL 87,350.00**

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,

Conforme: [Signature]
Signature Over Printed Name of Supplier
Date: 8/7/24

For the Regional Director:

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

Fund Cluster: 101
Fund Available: _____
[Signature]
GRETCHEN FERNANDEZ ESCALA
Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit

TRISTAN C. TEJEN, PhD. MA, REB
Director III / ARDA
05 AUG 2024

DY No.: 24-02-10209 Date: _____
ORS/BURS No.: 24-07-10247 Date: _____
Source of Funds: 101
UACS Code: SD2040540
Responsibility Center: 000/01-01-a-02-a
Amount: 87,350

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 **