

**PURCHASE ORDER**

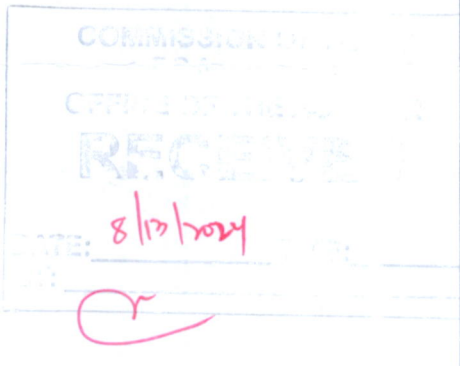
Department of Social and Welfare and Development  
Field Office Region XIII CARAGA

Supplier Name: <u>Berry Happy Mart</u>	Purchase Order No.: <u>24-07-1205</u>
Address:	Date: <u>2024-07-26</u>
TIN:	Mode of Procurement: <u>NP Small Value Procurement</u>
PhilGEPS No.:	

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

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

#	Unit	Description	Quantity	Unit Cost	Total Cost
1	PC/S	Bath Soap - DR S WONG SULFUR 135G	200.00	55.00	11,000.00
2	PC/S	Roll On Deodorant (Size Here)For Men, 40ml - REXONA	150.00	160.00	24,000.00
3	BOTTLE/S	Shampoo - HEAD AND SHOULDER 170ML	260.00	221.00	57,460.00
4	TUBE	Toothpaste 150ml - COLGATE, TWIN PACK 132G	260.00	180.00	46,800.00
5	PC/S	Detergent Soap (Bar)Individual pack - SURF BAR KALAMANSI JUMBO	300.00	13.00	3,900.00



": RRCY: Homelie Supplies/Non-Food for Resident's July 2024-August"

(Total Amount in Words)	<b>ONE HUNDRED FOURTY-THREE THOUSAND ONE HUNDRED SIXTY PESOS ONLY</b>	<b>TOTAL</b>	<b>143,160.00</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,**

<p><u>JENNY D. VERASCA</u> Signature Over Printed Name of Supplier Date: <u>8/13/2024</u></p>	<p><u>MARI-FLOR A. DOLLAGA-LIBANG</u> Signature Over Printed Name of Authorized Official Regional Director Designation</p>
<p><u>GRETCHEN FERNANDEZ ESCALA</u> Signature Over Printed Name of Chief/Accountant/Head of Accounting Division/Unit Date: <u>8/12</u></p>	<p><u>CRISTAN C. TELEN, PH.D. MA, REE</u> Director III / ARDA Date: <u>12 AUG 2024</u></p>

Fund Cluster: 601  
Fund Available: \_\_\_\_\_

DV No.: 24-07-10774 Date: \_\_\_\_\_  
ORS/BURS No.: 24-08-10754 Date: \_\_\_\_\_  
Source of Funds: 10  
UACS Code: 502149000  
Responsibility Center: COA-10-10-01-01  
Amount: 143,160

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 \*\*