	1	PURCHASE ORDER Department of Social and Welfare and D Field Office Region XIII CARAG		0	m- 07-091)
Supplier Name: Address: TIN: PhilGEPS No.: 4	E: DATALAN COMMUNICATION SERVICES 256 R. CALO ST., BUTUAN CITY 180-603-206-000		Purchase Order No.: Date: Mode of Procurement:		<u>25-06-0961</u> <u>2025-06-09</u> <u>NP Small Value Procurement</u>	
Gentlemen		the the following articles which to the terms and conditions	contained herein.			
Delease furnish this office the following articles subject to the terms and conditions lace of Delivery: DSWD Caraga Regional Office, Capitol Site, Butuan City		Delivery Term:		Within 30 Calenda Receipt of Approv Within 30 Workin the Inspection and	ed P.O. g Days After	
Date of Deliver	y:		Payment Term:		Report is received	
#	Unit	Description		Quantity	Unit Cost	Total Cost
1	PC/S	Document Scanner ScannerType: A4 sheet-fed, one-pass duplex Sensor Type: Contact Image Sensor (CIS) Optical Resolution: 600 Resolution: 50 - 1,200 dpi (in 1 dpi increments) ADF Capacity: 10 Daily Scan Volume: Up to 14,000 sheets / day - FUJITSU FI-8150	x 600 dpi Output	1.00	43,000.00	43,000.00
2	PC/S	External Hard Drive 1 terrabyte - WD		4.00	4,050.00	16,200.00
3	PC/S	LCD Projector Resolution: Full HD 1080p Brightness: 1000 lm Co 2500000:1 Focus: Manual Sound: Mono 1.5W 2 way - ACER X11	ntrast ratio: 28H	1.00	25,900.00	25,900.00
		ACCOUNTING SECTION ACCOUNTING SECTION IS CITE IN TO IS 1 9 JUN 2025 TIME: 270 M BY:	DATE: 7b	SSION O SWD FO OF THE A	ain	
		Printers, etc) for Office use. Continuing	,"		TOTAL	85,100.0
(Total Am	ount in Words)	EIGHTY-FIVE THOUSAND ONE HUNDRE	D PESOS ONLY		TOTAL	85,100.00
In case of	:	the full delivery within the time specified above, a penalty of one- Very truly ye APPU N. WH WWY e Over Printed Name of Supplier	ours, <u>MARI- FL</u>	OR A. DOLLAG	Authorized Officia	
Fund Cluster	101	Date	DV No: 0P-	Designation	Date:	
Fund Cluster: Fund Availabl	le:	AILEENS. MOLIAG	ORS/BURS No. Source of Funds UACS Code: _	5203 21 B	O Date:	
Signa	ature Over Printe	d Name of Chief Accountant/Haad of Accounting Division/Unit	Responsibility C	enter:	6-9-9-	

Appendix 61

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 **