

**PURCHASE ORDER**



Department of Social Welfare and Development  
Field Office VII, Cebu City

Supplier: <b>CORBOX CORPORATION</b>	PO No. DSWD7-2020-AMP-496
Address: Purok Gemelina, Tayud Liloan Cebu	Date: 8/11/2020
Contact No.: 424-9181	Mode of Procurement: NP-Emergency Cases
Contact Person: VIRGIE CENIZA PESCOS	TIN: 221-721-131-000

Gentlemen:  
Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery: VDRC, Tingub, Mandaue City	Delivery Term: within 7 days upon receipt of approved PO
Date of Delivery:	Payment Term: within 30 days after receipt of Billing/SI/DR

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
	pc.	supply and delivery of: <b>REGULAR SLOTTED CARTON</b> Materials: Kraftliner/ Kraftop Liner Board Dimension: (LxWxH) 395mm x 295mm 130mm +/-5% Thickness: 7 millimeters (+/-10%) Flute: C-B Flute Walling: Double Wall Wax: Waxed inside and unwaxed outside Packaging: Bundled by 10 Testing: To conduct the following on TWG evaluation: a. Machine Testing b. Box compression testing (595 Kgf) c. Should withstand minimum of 10 layers stacking high together with FFP components (8kg) d. Burst testing e. Edge wise testing Scoring: Double Scoring Items with factory or damaged upon delivery should be replaced within 1 year after delivery. Purpose: To be used in the Production of Family Food Packs, to be distributed to affected families during the COVID-19 crisis.  (Ref: PR No.: DSWD7-20-0862)	37,230	32.50	1,209,975.00
				5%	54,016.74
				1%	10,803.35

(Total Amount in Words)	<b>One Million One Hundred Forty Five Thousand One Hundred Fifty Four Pesos &amp; 91/100</b>	<b>Net of tax</b>	<b>1,145,154.91</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.

Very truly yours,

Conforme:

*Roselyn C. Sanchez*  
 Signature over Printed Name of Supplier  
 8/13/20  
 Date

*Rebecca P. Geamala*  
**REBECCA P. GEAMALA**  
 Regional Director

Funds Available:	<b>LOUIE RAY C. VILLARIN, CPA</b> Regional Accountant	ALOBS No. : _____ Amount : _____
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