

PURCHASE ORDER

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

Supplier: Address:	POBLACION ARGAO CEBU		PO No. DSWD7-AMP-2021-588 Date: 8/3/2021		
Contact No.:	0905-402-5094				
Contact No.:	CHERRY D. VILLANUEVA				
Gentlemen/Mada		EVA	TIN:	433-880-552-000)
Please furnish t	his Office the following article	es subject to the terms and conditions contained herein:	V		
Place of Delivery:		RRCY, BRGY. CANDABONG, BINLOD, ARGAO CEBU	Delivery Term:	livery Term: AUGUST 2021 to DECEMBER 2021	
Date of Delivery:			within 30 days after receipt of Payment Term: Sales Invoice/Billing Statement		
Stock No.	Unit	Desciption	Quantity	Unit Cost	Amount
	Productions:	supply & delivery of:	Log sự là để lại cá	e an mayonca	32004/85
	container		4,666	15.00	69,990.00
	075 N 386	WATER			Total Activities
	36 ,73	(Content Only)	me construction		* * * * * * * * * * * * * * * * * * *
		"5 gallons per container" 🔪			at all consecutions as
	05(6) 1600 3 05(6)000066	*Other conditions:	anger peri aratika	e parase en l'alexage	Eng Verselege Ve
	330	*1. Bill RRCY every end of the month.	esig teetak esita 14 marinaria	entra especial despendido de la constante de l	The control of the co
	- ma mano in company	*2. Payment will be within 30 working days upon receipt of billing statement.		restant the Goodest to	PROCESSES
	27 (444) 10 P	*3. The contract will end or stop when the approved budget for the contract has been depleted/consumed on or before December 31, 2021 or regardless of any remaining balances of the ABC on December 31, 2021, the contract will still end or stop.		Ougusta sin University	
	la ta	Purpose: For RRCY's water consumption.	Less:	5%	3,124.55
	Plane.	(Ref: PR No.: DSWD7-21-0738A)		1%	624.91
(Total Amount in Words) Sixty Six Thousand Thundred Forty Pesos 54/100			Net of tax	66,240.54	
In case of f	ailure to make the full de	elivery within the time specified above, a penalty	of one-tenth (1	1/10)	
	for every day of delay sl		des Ditt. yn 240 in		
			Very truly yours,	An	n
Conforme:	Greyonio	Cuawz Ir	RE	BECCA P. GEA	AMALA, DMPA/ birector
	Signature over Printed Name	e of Supplier			
unds Available:			ALOBS No	o. :	
	LOU	Regional Accountant	Amount :	,	
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