

**PURCHASE ORDER**

Department of Social Welfare and Development  
Field Office VII

cor. MJ Cuenco Ave. & Gen. Maxilom Ave., Cebu City Tel. # 2330261, 2338785 Fax # 4129908, 2321192

Supplier: <b>TSALEACH TRADING</b>	PO No. DSWD7-18-594
Address: CEBU CITY	Date: 9/13/2018
Contact No.: 406-2627/09985801514	Mode of Procurement: Shopping
Contact Person: RUDEZA PERAMIDE	TIN: 171-189-042-000

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

Place of Delivery: DSWD FO VII, Cebu City	Delivery Term: within 30 days upon receipt of Approved PO
Date of Delivery:	Payment Term: within 30 calendar days after receipt of Billing/SI/DR

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
	pcs.	<b>Fire Extinguisher</b>	<b>15</b>	<b>11,000.00</b>	<b>165,000.00</b>
		*Class C		5%	7,366.07
		*HFC		1%	1,473.21
		*FM 200			
Purpose: <b>for Home for Girls, AVRC II, RRCY, Regional Haven use.</b> (Ref: PR No.: DSWD7-18-0690)					

(Total Amount in Words) <b>One Hundred Fifty Six Thousand One Hundred Sixty Pesos &amp; 72/100</b>	<b>Net of tax</b>	<b>156,160.72</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: *Rudeza Peramide*  
Signature over Printed Name of Supplier  
  
9-24-18  
Date

Very truly yours,  
*Ma. Evelyn B. Macapobre* **CEO, III**  
**Director IV**  
**For the Regional Director:**  
*Grace D. Subong*  
**GRACE D. SUBONG**  
OIC - Assistant Regional Director for Administration

Funds Available: <b>LOUIE RAY C. VILLARIN, CPA</b> Regional Accountant	ALOBS No.: _____ Amount: _____ <b>9/11</b>
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