

PURCHASE ORDER



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

Supplier: BEROVAN MARKETING, INC.	PO No. DSWD7-AMP-2021-186
Address: NATIONAL HIGHWAY, TABOK, MANDAUE CITY	Date: 3/31/2021
Contact No.: 0998-582-7725	Mode of Procurement: Shopping
Contact Person: REYNOLD L. TY	TIN: 000-310-215-000

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 & conformity of PO
Date of Delivery:	FO: Tuesday & Thursday 1:00-4:00 PM CENTER: Every Friday 1:00-4:00 PM	Payment Term:	within 30 calendar days after receipt of Billing Statement

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
		supply & delivery of the ff:			
	pc.	ADULT WHEELCHAIR Specification: *Chrome Steel Frame, & W: 19"X L: 17" *Front Wheel size: 6-8 PNUE Solid Tire *Rear Wheel size: 24 with solid tire *Foldable type *Warranty for 1 year	36	3,880.00	139,680.00
	pc.	CANE for visual impaired, white color, single and foldable type Warranty for 1 year	11	380.00	4,180.00
	pc.	CRUTCHES , aluminum type Warranty for 1 year "	11	680.00	7,480.00
				Gross Amount:	151,340.00
		Purpose: For OP and PWD use. (Ref: PR No.: DSWD7-2021-0370)		5%	6,756.25
				1%	1,351.25

(Total Amount in Words)

**One Hundred Forty Three
Thousand Two Hundred Thirty
Two Pesos & 50/100**

Net of tax**143,232.50**

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:

REYNOLD L. TY

Signature over Printed Name of Supplier

Date

4/7/21

Very truly yours,

REBECCA P. GEAMALA, DMPA

Regional Director

Funds Available:

LOUIE RAY C. VILLARIN, CPA
Regional Accountant

ALOBS No. : _____

Amount : _____