

PURCHASE ORDER



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

Supplier: MUSTARD SEED SYSTEMS CORPORATION	PO No.: DSWD7-AMP-2021-441
Address: 178 MJ CUENCO AVENUE C. MINA STREET, MABOLO ROYAL HOTEL, CEBU CITY	Date: 6/16/2021
Contact No.: 0915-540-3451	Mode of Procurement: Shopping
Contact Person: JOFEN SUBA-AN	TIN: 204-332-439-001

Gentlemen / Madam:

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

Place of Delivery:	DSWD FOVII, Cebu City	Delivery Term: within 30 days after receipt and conformity of PO
Date of Delivery:	Every Tuesday & Thursday 1:00pm to 4:00pm	Delivery Term: within 30 days after receipt of Sales Invoice / Billing Statement

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
		supply and delivery of the ff:			
	unit	BARCODE LABEL PRINTER "ZEBRA"	2	19,500.00	39,000.00
		Specification: * Print Resolution: 203 dpi/8 dots per mm * Memory: 4 MB Flash, 8 MB SDRAM (Standard), 64 MB Flash with real-time clock for a total of 64 MB (Option) * Maximum Print Width: 2.2"/56 mm * Maximum Print Speed: 4"/102 mm per second * Media Sensors: Fixed reflective and transmissive sensors * Maximum Print Length: maximum 39.0"/ 990 mm * Included at least 4 rolls waterproof barcode paper label size: 50L x 40H mm horizontal.			
	unit	PRINTER "EPSON"	2	33,500.00	67,000.00
		Specification: *Wireless Color Photo Printer with scanner, to include 10 sets of continuous ink system Purpose: For PAMS PREMIS Implementation Directive from CO use. END USER: PAMS (Ref: PR No.: DSWD7-2021-0568)		Gross Amount:	106,000.00
			Less:	5%	4,732.14
				1%	946.43

Total Amount in Words	One Hundred Thousand Three Hundred Twenty One Pesos & 43/100	Net of tax	100,321.43
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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:

JOFEN SUBA-AN

Signature over Printed Name of Supplier

6/24/2021
Date

Very truly yours,

REBECCA P. GEAMALA, DMPA
Regional Director

Funds Available:

LOUIE RAY O. VILLARIN, CPA
Regional Accountant

ALOBS No. : _____
Amount : _____