

PURCHASE ORDER

DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT
IBP Road, Constitution Hills, Quezon City

424

Supplier	8 DIMENSIONS TRADING AND SUPPLIES INC.	PO No.	2018-05-0413
Address	No. 33 Tandang Sora St., Parang, Marikina City	Date	May 16, 2018
Tel. No.	0917-8458071	Mode of Procurement	NP-Small Value Proc.
PHILGEPS Reg. No.	2015-139309		
TIN	008-809-252-000		

Gentlemen:

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

Place of Delivery	DSWD-C.O. PMS Warehouse, IBP Road, Constitution Hills, Quezon City	Delivery Term	
Date of Delivery	within seven (7) working days upon receipt of the Purchase Order.	Payment Term	fifteen (15) to Thirty (30) days upon final inspection and acceptance.

Stock / Property	Unit	Description	Quantity	Unit Amount	Amount
	pc.	Heavy Duty Plastic Drum, capacity: ≥ 100 liters	1	950.00	950.00
	pc.	Flexible Water Hose, Meter: ≥ 12 meters	1	1,250.00	1,250.00
	kgs.	Rags	5	90.00	450.00
	pcs.	Detergent powder (≥ 500 grams per pc.)	15	260.00	3,900.00
	pc.	Air Conditioning Cleaning Cover with water pipe, ≥ 2.4 x 3.2	1	3,500.00	3,500.00
	pc.	Plastic Portable Bottle Pressure Spray, Capacity: ≥ 800ml	1	1,000.00	1,000.00
					11,050.00
		for DSWD-IMB (Materials and equipment for maintenance of airconditioning units of Data Center and IMB office).			
		AOQ No. 18-0479 NP-SV PR No. 2018041178			

Total Amount in Words	ELEVEN THOUSAND FIFTY PESOS ONLY	11,050.00
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In case of failure to make full delivery within the time specified above, the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.

Conforme:

[Signature]

JUDITH C. BARTOLOME
Signature Over Printed Name of Supplier

Date 6/11/18

Very truly yours,

[Signature]

FELINO O. CASTRO V
Signature over Printed Name of Authorized Official
Director, Information Management Bureau

Designation for

Fund Cluster _____ Funds Available _____ <p style="text-align: center;">JUBIE LEAH MAE S. COLES Signature Over Printed Name of Chief Accountant/ Head of Accounting Division/Unit</p>	ORS/BURS No. <u>02-101101-2018-03-030888</u> Date of the ORS/BURS: <u>05-21-18</u> Amount <u>11,050.-</u>
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