

PURCHASE ORDER

DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT

IBP Road, Constitution Hills, Quezon City

#963

Supplier :	MZR BUILDERS	PO No. :	2018-08-1058
Address :	#32 Chicago St. Brgy. Pinagkaisahan Cubao Q.C.	Date :	September 19, 2018
Tel. No. :	470-39-75/7272090	Mode of Procurement :	NP- Small Value
PhilGeps No.	2009-51649		
TIN :	006-788-239-000		

Gentlemen:

MC

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

Place of Delivery:	PS Warehouse,DSWD-Central Office, IBP Road, Constitution Hills Q.C.	Delivery Term:	Fifteen (15) Working days upon receipt of P.O.
Date of Delivery:		Payment Term:	Fifteen (15) to Thirty (30) days upon final inspection and acceptance of goods

Stock / Property No.	Unit	Description	Quantity	Unit Amount	Amount
	pcs	SUPPLY, DELIVERY AND INSTALLATION OF GLASS DRY-ERASE BOARD (Glass White Board) - Dimensions: 90cmH x 160cmL X 1/4" Thick; Dry-Erase Board, Glass Accessory Tray, Markers and Erase Other Specs: Tempered safety-beveled glass, painted white backing, boardless, non-magnetic, wall mounted using padded circular wall retainers/glass bolt, fully erasable using wet/dry markers or grease pencils Please Note: Attached sample picture is for reference only. Since Glass board is to be installed on a dry wall, the supplier must visit and check the site upon fabrication and commencement of work. Price is inclusive of VAT and delivery xxxxxxxxxxxxxxxxxxxnothing followsxxxxxxxxxxxxxxxxx Reference PR No. 2018072463 AOQ No. 18-1121 NP-SV	6	11,950.00	71,700.00

(Total Amount in Words)	Seventy One Thousand Seven Hundred Pesos Only	P	71,700.00
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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 over printed name of Supplier 10/02/18 _____ Date	Very truly yours, _____ Signature over Printed Name of Authorized Official OIC, Director _____ Designation
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Fund Cluster: _____ Funds Available: _____ _____ Signature over Printed Name of Chief Accountant/ Head of Accounting Division/Unit	ORS/BURS No.: _____ Date of the ORS/BURS: _____ Amount: _____
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