

Parts Service
on/Delivery
require
income tax

PURCHASE ORDER

PRES. CARLOS P. GARCIA MUNICIPAL HOSPITAL, PRES. GARCIA, BOHOL
Agency/Procuring Entity

Supplier : **DES STRONG MOTORS INC.** D.O. No. : **P.O. # - PHO - 2020 - 165**
 Address : **1546 CPG NORTH AVENUE, BOOY DISTRICT,** Date : **June 08, 2020**
TAGBILARAN CITY
 Telephone No. : _____ Mode of Procurement : **Negotiated Canvass thru**
 TIN : _____ **2nd failure of bidding**

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

Place of Delivery: **PRES. CARLOS P. GARCIA MUNICIPAL HOSPITAL, PRES. GARCIA, BOHOL** Delivery Term: Please Read Terms & Conditions at the back hereof
 Date of Delivery : **THIRTY (30) CALENDAR DAYS AFTER RECEIPT** Payment Term: Upon Completion of Delivery
 Warranty Period: **OF NOTICE TO PROCEED** ✓
THREE (3) MONTHS

Item No.	QTY	UNIT	DESCRIPTION OF SUPPLIES	UNIT COST	AMOUNT
1	1	pc.	Motor/Service Vehicle with FB Body (Dual AC)	916,900.00	916,900.00
			Brand: - Suzuki APV		VVVVVVVV
			Body Type - Commercial		
			Transmission Type - Manual		
			Engine Size - 2.5L		
			Displacement - 2,477 cc		
			Number of Cylinders - 4		
			Number of Valves - 8		
			Transmission Category - 5 Speed Manual		
			Power Train: Rear - Wheel Drive		
			Max Output (HP) - 71 hp @ 4,200 rpm		
			Max Torque (nm) - 140 Nm @ 2,500 rpm		
			Fuel Type - Diesel		
			Fuel Capacity - 55 liters		
			Length - 4,260 mm		
			Width - 1,695 mm		
			Height - 1,795 mm		
			Wheelbase - 2,350 mm		
			Turning Circle - 9.8 m		
			Ground Clearance - 195 mm		
			X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X		

(total amount in words) **NINE HUNDRED SIXTEEN THOUSAND NINE HUNDRED PESOS ONLY**

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one (1) percent for everyday of delay shall be imposed.

Conforme: _____ Very truly yours,

fa: [Signature]
DES STRONG MOTORS INC.
Signature over printed name of Supplier

ATTY. ARTHUR C. YAP
Governor

6/16/2020
Date

By Authority of the Governor:
[Signature]
ATTY. KATHYRIN FE D. PIOQUINTO
Provincial Administrator

Date Approved: _____

Funds Available: *[Signature]*
EUSTAQUIO A. SOCORIN
Provincial Treasurer

Earmarked No. : **1370**
Amount : **P 1,000,000.00**