Standard Form Number: 57 - 6000-58 Revised on: May 24, 2304 Standard Form Title: Purchase Order

PURCHASE ORDER

CLARIN COMMUNITY HOSPITAL, CLARIN, BOHOL Agency/Procuring Entity

upplier	:	BOHOL QUALITY CORPORATION		D.O. No. : _	P.O. # - PHO - 2020 - 182	
Menter Drocker		0066 C.P.G. North Avenue, Poblacion II,		Date :	July 02, 2020	
ddress	15	Tagbilaran City		Mode of	PUB	LIC
elephone No.:				Procurement :	BIDDING	
N	:					
entlemen/	Mesdam	nes:	ce the following articles subject to t	ne terms and conditio	ns contained h	erein:
Pleas	e turnis	h this Util	ce the following district -	Delivery Term: Please	read Terms & C	onditions at
lace of De	livery:	CLARIN C	<u>OMMUNITY HOSPITAL, CLARIN, BOHOL</u>	the back hereof		
-σκε (#12-464 ±1650)	Service M	THIRTY IS	0) WORKING DAYS UPON RECIEPT OF	- Payment Term: Upon	Completion of I	Delivery
ate of Del	ivery:	11 10 X1 1 X	P.O./NOTICE TO PROCEED			
Warranty F	eriod:		THREE (3) MONTHS			11/2
			DESCRIPTION OF SU	DDLIFS	UNIT COST	AMOUNT
tem No.	QTY	UNIT	DESCRIPTION OF 30	merican Heritage	9,120.00	27,360.00
1	3	units	Electric Water Dispenser (Hot & Cold) - A	American Frontage	2,825.00	16,950.00
2	6	units	Heavy Duty Wall Fans - KDK		26,999.00	26,999.00
3	1	unit	10 cu. Ft. Refrigerator - G.E.		33,235.00	33,235.00
4	11	unit	12 cu. Ft. Refrigerator - G.E. 8 cu. Ft. Refrigerator - Offers 7.5 c.u. Ft.	- CAMEL	18,169.00	18,169.00
5	1	unit	X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-	X-X-X-X-X-X		122,713.00
والوالية	الساليد		TOTAL	> > >	-	VVVVVVVV
	- No. L	-				
	0.8	-				
	-	+	u caul			
			The second secon			A. A.
					100	
					Trum ILLINES	
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		MAN TO THE	THE STATE OF THE S
						TESOS ONLY
	1 -		ONE HUNDRED TWENTY TWO	THOUSAND SEVEN HU	NDRED THIRTER	N PESUS UNLT
(total am	ount in	words)	ke the full delivery within the time spo	ecified above, a penalt	y of one-tenth (1	(/10)
In ca	se of fai	lure to ma	day of delay shall be imposed.			
of one (1) percen	t for every	day of deta, street			
				Very truly yours,		
Conform	e:	04 04	un/			VAD
	nou.	TIALIA	Y CORPORATION	<u>A1</u>	TY. ARTHUR C. '	IAF
₩.,	<u>BUIII</u>	e over prir	ted name of Supplier		Governor	
4	olgnatur	e ovenpjii	2020	Ρν Λιι	thortiy of the Go	overnor:
		MI	27-2020	ру Ач	thorary or an	
N .			Date		Karle Po &	
*				ATTY. K	ATHYRIN FE D. P	OTMIUDOI
*			20	Pro	ovincial Adminis	trator V
i						
1				Date approved:		_
ll						
l						
				27274		0671
Funds	Available	9:	k	Earmarked No. :		150,000.00
N.		FUSTAOL	A. SOCORIN	Amount :		
11		-44.1	al Treasurer		18 N S N	