Standard Form Number: SF - GOOD-58

Revised on: May 24, 2004

Standard Form Title: Purchase Order

PURCHASE ORDER

PROVINCIAL HEALTH OFFICE, NEW CAPITOL BUILDING, TAGBILARAN CITY Agency/Procuring Entity

Supplier : Address : Telephone No.: TIN		(COPYLANDIA OFFICE SYSTEMS CORPORATION	D.O. No. :	P.O. # - PHO - 2022 - 158	
		0220 Apostol Commercial Center, Maria Clara St., Poblacion II, Tagbilaran City		Date : Mode of Procurement :	August 17, 2022 DIRECT CONTRACTING	
Gentlemer			Office the following articles subject to	the terms and conditions contain	ned herein	
Please turn		PROVINCIAL HEALTH OFFICE, NEW CAPITOL BUILDING, TAGBILARAN CITY Delivery Term: Please Read at the back hereof				
Date of Delivery : Warranty Períod:			Fifteen (15) upon receipt of NTP Payment Term: Upon Completion of Delivery THREE (3) MONTHS			
Item No.	QTY	UNIT	T DESCRIPTION O	OF SUPPLIES	UNIT COST	AMOUNT
1	1	roll	Riso Master B for KZ30		1,320.00	1,320.00
2	1	рс	Toner for Riso KZ30		1,150.00	1,150.00
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		 	X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-			-
	 	Total >>>>>>>>				2,470.00
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		<u> </u>				
(total amo	ount in v			SAND FOUR HUNDRED SEVENTY PE		
of one (1) I			of failure to make the full delivery within lay of delay shall be imposed.	n the time specified above, a penal Very truly yours,	ty of one-tenth (1/1	.(0)
Comon	С.	. <	\nearrow	very traily yours,		
<u>COPYLA</u> Signa	ture qy	JG 2	ed name of Supplier Z ZUZZ	By Authority ASTERIA	LE C. AUMENTAD overnor of the Governor C. CABERTE Administrator	16
Funds Av	/ailahle	: ~ #		Date approved:	_/ AUG 1	8 2022
		N/		Earmarked No. :	12	
			A. SOCORIN	Amount :	P 2,50	00.00
I	Pr	ovincial	Treasurer 5	1		