

80/P.O

PURCHASE ORDER

CITY OF CALAPAN

Supplier: SOUTHERN MEDITECH	P.O. No.: _____
Address: <u>Ilaya, Calapan City</u>	Date: _____
TIN: <u>457-037-639-000</u>	Mode of Procurement: <u>SMALL VALUE</u>
	PR No./s: <u>1487</u>

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

Place of Delivery: <u>CSWDD</u>	Delivery Term: <u>FOB Destination</u>
Date of Delivery: <u>within seven (7) days upon receipt of P.O.</u>	Payment Term: <u>N/60</u>

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
		Lot 1 - Assistive Devices			
		25-Jul-23			
1	pcs	Wheelchair	28	6,980.00	195,440.00
2	pcs	Crutches	2	1,480.00	2,960.00
3	pc	Walker	1	2,980.00	2,980.00
4	pc	Quad Cane	1	1,180.00	1,180.00

(Total Amount in Words) TWO HUNDRED TWO THOUSAND FIVE HUNDRED SIXTY PESOS **202,560.00**


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

Conforme:


SOUTHERN MEDITECH
 Signature over Printed Name of Supplier

_____ Date

Very truly yours,


MARILOU F. MORILLO
 City Mayor

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.: _____