

Standard Form Number: SF-GOOD-58  
Revised on: May 24, 2004

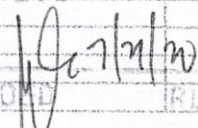
BAC  
File

**PURCHASE ORDER**  
City Government of Iligan  
Agency / Procuring Entity

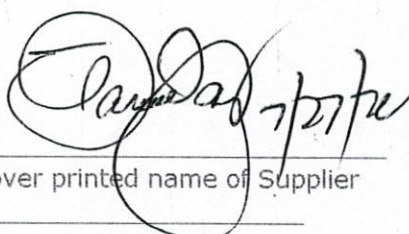
|                |  |             |                                      |
|----------------|--|-------------|--------------------------------------|
| Supplier       | : MINKONSTRAK ENGINEERING & GENERAL SERVICES | P.O. No.    | : CGSO-20-059(NP-SV)                 |
| Address        | : Dalipuga, Iligan City                      | Date        | : May 19, 2020                       |
| E-mail Address | :  | Mode of     |                                      |
| Telephone No.  | : 063-09177160220                            | Procurement | : Negotiated Procurement-Small Value |
| TIN            | :  |             |                                      |

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

|                   |        |               |  |
|-------------------|--------|---------------|--|
| Place of Delivery | : CGSO | Delivery Term | : 10 calendar days upon receipt of approved Purchase Order |
| Date of Delivery  | :      | Payment Term  | :  |

| STOCK NO.  | UNIT | DESCRIPTION   | QTY. | UNIT COST | AMOUNT                  |
|--|------|---|------|-----------|-------------------------|
| 1  | Lot  | Procurement of Surveying Services for Gov't Real Properties<br>X-X-X-X-X-X-X-X-X        | 1    |           | PHP 90,000.00<br>VVVVVV |
|  |      | For Relocation Survey of the Records Division, City General Services Office, this city. |      |           |                         |
| TORU/CTO _____ DATE _____<br>RECORDED _____ REVIEW _____<br> |      |   |      |           |                         |
| (Total Amount in Words)  |      |   |      |           | PHP 90,000.00           |

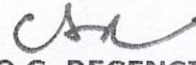
In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one (1) percent for every day of delay shall be imposed.

Conforme: 

Signature over printed name of Supplier \_\_\_\_\_

Date \_\_\_\_\_



Very truly yours,  
  
**CELSO G. REGENCIA**  
City Mayor

|  |                                   |
|--|-----------------------------------|
| Funds Available:   | ALOBS No. : <u>1061-2020-3-66</u> |
| <br><b>MA. ARWINA N. ABARCA</b><br>Assistant City Accountant<br>OIC-City Accountant | Amount : <u>90,000-</u>           |
|  | <b>GENERAL FUND</b>               |