

PURCHASE ORDER

City Government of Iligan

Agency / Procuring Entity

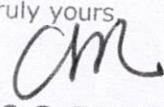
Supplier : JB PHARMA & TRADE CENTER	P.O. No. : GTLMH-TF-018 MLS (NP-SV)
Address : CAGAYAN DE ORO CITY	Date : May 6, 2020
E-mail Address :	Mode of Procurement : Negotiated Procurement-Small Value
Telephone No. :	
FAX :	

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

Place of Delivery : GTLMH	Delivery Term : 10 Days	
Date of Delivery :	Payment Term :	

STOCK NO.	UNIT	DESCRIPTION	QTY.	UNIT COST	AMOUNT
1		Procurement of 30 kits PPE Level 4 NCOV Kit	lot	xxx	PHP 25,500.00
		XX			
		XX			
(Total Amount in Words): Twenty Five Thousand Pesos					PHP 25,500.00

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.

<p>Conforme: <u>CINDERELLA MIRANA</u> Signature over printed name of Supplier <u>5-8-2020</u> Date</p>	<p>TORU/CTO _____ DATE _____</p> <p>RECORDED _____</p> <p>Very truly yours,  CELSO G. REGENCIA City Mayor</p>
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<p>Funds Available:</p> <p><u>JMA. ARWINA N. ABARCA</u> Assistant City Accountant OIC-City Accountant</p>	<p>ALOBS No. : <u>417.025.0009</u> Amount : <u>₱ 25,500.</u></p>
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TRUST FUND

NOTE: This serves as Notice of Award and Contract once conformed within Ten (10) Days, by the supplier.