

PURCHASE ORDER
 Department of Social Welfare and Development
 Cordillera Administrative Office

Annex G-5

Supplier	SMOKEY TRANSPORT INC.	Purchase Order No.	2020-06-229
Address	#110 CTTL BLDG. OTEK ST., BAGUIO CITY	Date	6/30/2020
Gentlemen:	Mode of Procurement		SVP

Please furnish this office the following articles subject to the terms and conditions herein.

Place of Delivery	Within Baguio and Benguet			Delivery Term:	Complete
Date of Delivery	AS SCHEDULED			Payment Term:	Charge
Stock/Property	Unit	Description	QTY	Unit Cost	Total Cost
		HIRE OF VEHICLE FOR STANDARDS COMPLIANCE OF SOCIAL WELFARE AND DEVELOPMENT AGENCIES AND SERVICE PROVIDERS			
	day	4x4/ SUV/ Pick-up/Van can accommodate a max of 3 passengers; 7 passengers (if van) excluding driver (social distancing is considered) Places of travel: Benguet and Baguio City Delivery of Services is within July 2020	5	3,400.00	17,000.00
	day	4x4/ SUV/ Pick-up/Van can accommodate a max of 3 passengers; 7 passengers (if van) excluding driver (social distancing is considered) Places of travel: Benguet and Baguio City Delivery of Services is within August 2020	20	3,400.00	68,000.00
		OTHER REQUIREMENTS	COMPLIANCE		
		a. Preferably Vehicle year model must be at least 2017 and up	✓		
		b. Fully Air Conditioned	✓		
		c. Attach up to date OR, CR, and Driver's License	✓		
		d. With certificate of Public Convenience	✓		
		e. Gasoline, food and lodging of the drivers will be handled by the service provider	✓		
		f. Date and destination can be moved/changed and shall be coordinated with the supplier 1 or 2 days before the travel date at any given time during emergencies/disaster wherein immediate need of the vehicle will be observed	✓		
		g. Can provide at least 2-4 vehicle during simultaneous travels	✓		
		h. Drivers should be well familiar with road terms	✓		
		i. Mode of payment: Payments will be processed on a monthly basis according to the actual accumulated travels within the month	✓		
(Amount in words)				TOTAL	85,000.00
				Eighty Five Thousand Pesos Only	

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:

Very Truly Yours, 

(Signature over Printed Name) _____ Date _____

LEO L. QUINTILLA
 Signature over Printed Name of Authorized Official
OIC Regional Director
 Designation

Bank Account Name _____ Bank Account Number _____

TIN Number _____ *please tick tax type
 vat
 non-vat
 Date of BIR Registration _____

und Cluster: CMP Cont. FD
 unds Available: 85,000.00

ORS/ BURS No. : 62-107101-2020-06-0199A
 Date of the ORS/ BURS: 6/30/20
 Amount: 85,000.00

WILBOURN B. BACOLONG
 ACCOUNTANT III