PURCHASE ORDER

Department of Social Welfare and Development Cordillera Administrative Office

Supplier		THE STABLE EDUCATIONAL SUPPLY	Purchase Order No.		2021-07-438
Address		#12 CJ LOWER BONIFACIO ST., BAGUIO CITY	Date		7/23/2021
		#12 C3 LOWER BONIFACIO ST., BAGOIO CITY		Mode of Procurement	
Gentleme	Please	e furnish this office the following articles subject to the terms and conditions	s herein.		SHOPPING
Place of Delivery Date of Delivery		DSWD-CAR, #40 North Drive, Baguio City		Delivery Term:	
		10 CALENDAR DAYS UPON RECEIPT OF PURCHASE ORDER		Payment Term:	Charge
Stock/ Property	Unit	Description	QTY	Unit	Total
, opency		PURCHASE AND DELIVERY OF OFFICE SUPPLIES		Cost	Cost
		RRPTP	 	+	
1	ream	Paper, multicopy, 80 gsm, LEGAL	8	201.14	1,609.12
2	set	File tab divider, LEGAL	20	45.00	900.00
3	piece	Data file box,LEGAL	13	120.00	
4	pad	Notepad, stick-on, 3x3	7		1,560.00
	Puu	SOCPEN		18.00	126.00
1	pad	Notepad, stick-on, 4x3	900	07.55	-
2	ream	Paper, multicopy, 80 gsm, A4	828	27.00	22,356.00
3			500	175.66	87,830.00
4	ream	Paper, multicopy, 80 gsm, LEGAL	250	201.14	50,285.00
	box	Staple Wire, Standard, #35, 5000s/box, 26/6	276	30.00	8,280.00
5	roll	Tape, Transparent, 1", 24mm	84	15.00	1,260.00
6	roll	Tape, Transparent, 2", 48mm	42	19.00	798.00
7	unit	Calculator, Desktop, compact, electronic, LCD display, 12 digits, two-way power source	12	200.00	2,400.00
8	book	Record Book, 500 pages	15	85.00	1,275.00
9	piece	Puncher, heavy duty	18	175.00	3,150.00
		OTHER REQUIREMENTS		COMPLIANCE	0,100100
		Delivery period is within 10 calendar days upon receipt of Purchase Order. When the last day of delivery falls on a weekend/holiday, the deadline shall be on the next working day.			
		Delivery Place: DSWD-CAR, 40 North Drive, Baguio City		✓	
1075(2)				TOTAL	181,829.12
(Amount	t in words)	One Hundred Eighty One Thousand Eight Hundred Twenty Ni	ne Pesos and T	welve Centavos (Only
onforme:	апите го таке	the full delivery within the time specified above, a penalty of one-tenth (1/10) of or the undelivered item/s.		very day of delay s	
(Sigi	nature over Pr	rinted Name) Date		Regional Director Pesignation	uthorized Official
E	Bank Account	Name Bank Account Number	1	Designation	
7	ΓIN Number	*please tick tax type Date of BIR Registration vat non-vat		/	NA - 4 7 7
ınd Cluste	r: MDS CMF C	world & MDS conta	ORS/ BURS No.	1- COZ-10 502 -1	7-11879, Da-12
ınds Availa	able:		Date of the ORS	7 71 7,	121
V	VILBOURN A		Amount:	181,829.12	