



PURCHASE ORDER

MSSSD No. 472

Procuring Department: **Provincial Health Office**

Supplier : G. TOLENTINO MARKETING INC P.O.:

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No. 1715

Address : Calapan City, Oriental Mindoro

E-mail Address : _____ Date : **December 16, 2019**

Telephone No. : **288-5495** Mode of Procurement : **Negotiated/SVP**

TIN : **009-908-542-000**

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

Place of Delivery: PHO-OMPH Delivery Term: w/ in 7 calendar days upon receipt of NTP
 Payment Term : **charge**

Item No.	UNIT	DESCRIPTION	QTY.	UNIT COST	AMOUNT
1	tanks	LPG 50kg. Refill	28	3,192.00	89,376.00
2	tanks	LPG 11kg. Refill	4	714.00	2,856.00
		X-X-X-X			92,232.00

For OMPH Dietary & CSR use.
 2-01-01-010 of
A/P 2020
 502-03-990 ml

TOTAL AMOUNT IN WORD): ninety two thousand two hundred thirty two 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 (1) percent for everyday of delay shall be imposed.

By Authority of the Governor:
 Very truly yours
 HUBBERT CHRISTOPHER A. DOLOR, MD, MPA, MHA
 Provincial Administrator
HUMERLITO A. DOLOR MPA, PhD.
 Provincial Governor

Conforme:

GEORGE TOLENTINO
 Signature Over Printed Name of Supplier
 Date 12/19/19

Funds Available:

ALTHEA F. AGUTAYA
 Provincial Accountant

OBLIGATION REQUEST NO: _____
 AMOUNT : _____