



PURCHASE ORDER

11/29

MSSSD No. 327

E.O. CONTROL # 180

Procuring Department: OMSDH

Supplier : CALOOCAN GAS CORPORATION P.O.: **1 0 0 1 9 1 1** **No. 1898**

Address : Calapan City, Oriental Mindoro

E-mail Address : _____ Date : November 19, 2019

Telephone No. : 288-2221 Mode of Procurement : negotiated/SVP

TIN : 000-295-453-010

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

Place of Delivery: OMSDH Delivery Term: w/in 7 calendar days upon receipt of NTP
Payment Term : charge


Item No.	UNIT	DESCRIPTION	QTY.	UNIT COST	AMOUNT
1	cycl	Medical Oxygen Refill x-x-x-x For OMSDH patient's use.	500	550.00	275,000.00


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

Very truly yours
HUMERLITO A. DOLOR MPA, PhD.
Provincial Governor

Conforme:


RICHMOND M. CHU
Signature Over Printed Name of Supplier
Date 11-25-19

Funds Available:

ALTHEA F. AGUTAYA
Provincial Accountant

OBLIGATION REQUEST NO: 201-01010 RF-omsdh 1125-54
AMOUNT : 275,000.00