## **PURCHASE ORDER**

390

	AMIZ CITY			
Supplier : ANAS MULTI TRADE DEV'T CORP	P.O. No. :	2025-02 <b>-00</b> %		
Address : OZAMIZ CITY		Date: 02/  4 /2025  Mode of Procurement: SHOPPING		
TIN:	Mode of Pro			
Gentlemen:  Please furnish this Office the following articles subject to the	he terms and conditi	ons contained here	in:	
Place of Delivery: DALAPANG ELEMENTARY SCHOOL		Delivery Term : Pick Up		
Date of Delivery: FEBRUARY 17, 2025	F	Payment Term : CHECK		
Stock/ Property No.  Description	Quantity	Unit Cost	Amount	
5 piece DETERGENT BAR	6	9.00	54.00	
6 ream DETERGENT POWDER, Multipurpose	6	54.00	324.00	
7 pack BALLPEN	48	5.00	240.00	
8 cart DOUBLE SIDED TAPE	30	24.00	720.00	
9 cart MEDAL	40	45.00	1800.00	
10 cart Laminating Machine heavy duty	1	2999.00	2999.00	
11 cart Laminating Film thin	4	799.00	3196.00	
***Nothing Follows***				
	Total A	Total Amount:		
Total Amount in Words NINE THOUSAND THREE HUNDS	DED THIRTY THE	EE DESOS ONI V		
In case of failure to make the full delivery within the time specified above, a f delay shall be imposed on the undelivered item/s.  Conforme:  Signature over Printed Name of Supplier  02-14-2025  Date	a penalty of one-ten Very truly you	rs, ADOMS D. CAR	NADA Authorized Officia	
In case of failure to make the full delivery within the time specified above, a f delay shall be imposed on the undelivered item/s.  Conforme:  Signature over Printed Name of Supplier  02-14-2025  Date  REGULAR FUNDS  REGULAR FUNDS	Very truly you Signature ove  ORS/BURS N Date of the OR Amount:	rs, ADOMS D. GAR r Printed Name of School Head Designation	NADA Authorized Officia	
In case of failure to make the full delivery within the time specified above, a f delay shall be imposed on the undelivered item/s.  Conforme:  Signature over Printed Name of Supplier  02-14-2025  Date  REGULAR FUNDS	Very truly you Signature ove  ORS/BURS N Date of the OR Amount:	rs, ADOMS D. GAR r Printed Name of School Head Designation	NADA Authorized Officia	
In case of failure to make the full delivery within the time specified above, a f delay shall be imposed on the undelivered item/s.  Conforme:  Signature over Printed Name of Supplier 02-14-2025 Date  MCluster:  REGULAR FUNDS  Signature over Printed Name of Chief Accountant/Head of Accounting	Very truly you Signature ove  ORS/BURS N Date of the OR Amount:	rs, ADOMS D. GAR r Printed Name of School Head Designation	NADA Authorized Officia	