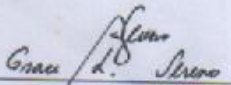



# **PURCHASE ORDER** DEPED, DIVISION OF OZAMIZ CITY

|  |      |   |  |           |                  |
|--|------|---|--|-----------|------------------|
| Supplier <b>JCF TECHNOLOGIES INC.</b>  |      | P.O. No. : <b>2025 - 02 - 0007</b>                  |  |           |                  |
| Address <b>OZAMIZ CITY</b>   |      | Date : <b>02/ 11 / 2025</b>                         |  |           |                  |
| TIN : <b>425-638-013-0000</b>  |      | Mode of Procurement :                               |  |           |                  |
| Gentlemen:   |      |   |  |           |                  |
| Please furnish this Office the following articles subject to the terms and conditions contained herein:  |      |   |  |           |                  |
| Place of Delivery : <b>DIEGO TUASTOMBAN ELEMENTARY SCHOOL</b>  |      | Delivery Term : <b>Pick Up</b>                      |  |           |                  |
| Date of Delivery :   |      | Payment Term : <b>CASH ON DELIVERY</b>              |  |           |                  |
| Stock/<br>Property<br>No.  | Unit | Description   | Quantity   | Unit Cost | Amount           |
| 1  | SET  | Computer Desktop set                                | 1  | 23,000.00 | 23,000.00        |
|  |      | <b>***Nothing Follows***</b>                        |  |           |                  |
|  |      |   | <b>Total Amount:</b>   |           | <b>23,000.00</b> |
| Total Amount in Words  |      | Seven Thousand Three Hundred Thirty Four Pesos Only |  |           |                  |
| <p>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.</p>   |      |   |  |           |                  |
| <p>Conforme:</p> <p align="center"> <br/> <u>Grace L. Sison</u><br/>             Signature over Printed Name of Supplier<br/>             Date <u>12/12/25</u> </p> |      |   | <p>Very truly yours,</p> <p align="center"> <br/> <u>LIDA L. BACO</u><br/>             Signature over Printed Name of Authorized Official<br/> <u>School Head</u><br/>             Designation           </p> |           |                  |
| Fund Cluster : <b>REGULAR MOOE</b>   |      | ORS/BURS No. :                                      |  |           |                  |
| Funds Available :  |      | Date of the ORS/BURS:                               |  |           |                  |
|  |      | Amount :  |  |           |                  |
| <p align="center">Signature over Printed Name of Chief Accountant/Head of Accounting<br/>Division/Unit</p>   |      |   |  |           |                  |