



PURCHASE ORDER
DEPED, DIVISION OF OZAMIZ CITY

Supplier : KEEDEE OFFICE SUPPLIES TRADING Address: Ledesma Extension, Carmen, Ozamiz City TIN : 306-794-052-00001			P.O. No.: 2025-06-015 Date : June 10, 2025 Mode of Procurement: SVP		
Gentleman: ff Please furnish this office the following article subject to the term and conditions contained herein:					
Place of Delivery: EMBARGO ELEMENTARY SCHOOL Date of Delivery: Within 5 days upon receipt of payment			Delivery Term: Pick-up Payment Term: One time check issuance.		
Stock/ Property No	Unit	Description	Quantity	Unit Cost	Amount
1	set	Discuss throw	1	1,400.00	1,400.00
2	set	Javelin Throw	1	2,200.00	2,200.00
3	set	Shot Put	1	1,400.00	1,400.00
4	set	Monobloc Chair - cream	20	460.00	9,200.00
5	set	Printer 3 in 1. (with photocopy, scanner and printing system for long bondpaper)	3	16,000.00	48,000.00
6	set	badminton	1	2,200.00	2,200.00
7	packs	specialty paper	30	26.00	780.00
8	pc	basketball	1	1,350.00	1,350.00
9	pc	volleyball	1	430.00	430.00
10	pc	Sepak takraw ball	1	500.00	500.00
11	set	table tennis rockets	2	500.00	1,000.00
nothing follows					
Total Amount					<u>68,460.00</u>
(Total Amount in Words) <i>Sixty Eight Thousand Four Hundred Sixty Pesos & 00/100 only.</i>					
<p>In case of failure to make the full delivery within the time specified above, a penalty of one - tenth (1/10) of the percent for every day of delay shall be imposed on the undelivered item/s.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 45%;"> <p>Conforme:</p> <div style="text-align: center;">  Signature over Printed Name of Supplier <u>6-10-25</u> Date </div> </div> <div style="width: 45%;"> <p>Very truly yours,</p> <div style="text-align: center;">  PRIMENCITA G. BAGUIO Signature over Printed Name of Authorized Official School Head Designation </div> </div> </div>					
Fund Cluster: <u>Regular MOOE</u> Funds Available: _____ Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit			ORS/BURS No.: _____ Date of the ORS/BURS: _____ Amount: _____		