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Republic of the Philippines
Office of the President



PURCHASE ORDER

PO Number **PO000665**

(Please quote this number on all related correspondence, delivery/shipping papers and invoice)

TO: DACRISDEEK ENTERPRISES 69 Vallarta, Pulong Munti San Isidro, Nueva Ecija Contact Name: Irma Francisco Bulalakaw Tel No.: 514-5521 TIN: 239069130000	DELIVER/SHIP TO: Bases Conversion and Development Authority 2F Bonifacio Technology Center 31st Street corner 2nd Avenue BGC Taguig NCR 1634 Contact Name: Procurement Division Tel No.: 575-1700 Fax No.: 816-0978 TIN: 002-219-694-000
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PO Date of Approval	PR No.	Requesting Department	Mode of Procurement	Date of Delivery	Delivery Term	Payment Term
1/28/2019	0000468		SVP		21 days	CREDIT 30

Item	Quantity	Unit	Description	Unit Cost	Amount
1	11.00	UNIT	EMERGENCY LIGHT, LED, LIGHT SOURCE 2 X3 WATTS, HIGHPOWER, BATTERY: SEALED LEAD ACID 12V 9.0AH, RAE	1,780.00	19,580.00
2	4.00	ITEM	FIRE EXTINGUISHER HCFC,123, 10 LBS, BRAND NEW, LION	6,700.00	26,800.00

NOTE: GSD - LED LIGHT & FIRE EXTINGUISHER FOR VOA- LOGHOME 3
PURCHASE REQUEST NO. 0000613

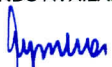
PESOS: FORTY SIX THOUSAND THREE HUNDRED EIGHTY AND 00/100 PESOS ONLY	46,380.00
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Terms and Conditions:


This Purchase Order (PO) shall be governed by the General Terms and Conditions printed at the back hereof

Note: Please attach the original copy of this order together with the DELIVERY RECEIPT and SALES INVOICE in the triplicate.


FUNDS AVAILABLE:


HEDDA Y. RULONA
 DMII, Budget Department

Approved by:


BGEN CARLOS F. QUITA (RET)
 Vice President, CSG

Recommended by:



SUSANA R. RAMOS
 Officer-In-Charge, PPMD

I hereby certify that I am authorized representative of the company and that by affixing my signature, it shall bind the company I am representing to the terms and conditions of the PO and all applicable provisions of RA 9184 and its revised IRR and other applicable government rules.

I further certify that the above prices, which were quoted in the Request for Quotation (RFQ), are inclusive of all taxes, freight, insurance and all other incidental expenses necessary for its delivery.

CONFORME:

Date Received: FEB. 4, 2019


IRMA F. BULALAKAW
 Printed Name and Signature of Authorized Representative

(The supplier shall sign and return the acknowledgement copy to BCDA-Procurement or through fax within five (5) working days after issuance.)

KINDLY REFAX TO 5751785 OR EMAIL TO ifdavid@bcda.gov.ph THANKS.