



PURCHASE ORDER

Supplier : <u>FOREMOST AUTO CARE SERVICES</u>	P.O. Number: 2022041618
Address : <u>TAGUM CITY</u>	 202202143873A5F
PhilGEPS Registration No. : 270599 Tel./Fax No. : * Registration Certificate : DTI	Date : Apr 19, 2022 Mode of Procurement : Shopping B P.R. No. : 2022021438(Regular Purchase)
Req. Office : PEEDO - DDN Hospital (Kapalong Zone)	

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

Date of Delivery : _____ Payment Term : ON ACCOUNT	Delivery Term: 10 Calendar Days
Place of Delivery : PGSO Warehouse	

I.N.	Quantity/Unit	Item	Unit Cost	Amount
1	4.00 PCS	TIRE #215X70X16 -NYLON BELTED thailand	9,500.00	38,000.00
2	8.00 PCS	TIRE #205RX15 -NYLON BELTED thailand	8,500.00	68,000.00
3	4.00 PCS	BATTERY 11 PLATES, 12 VOLTS yokohama super premium advance heavy duty	7,500.00	30,000.00
4	4.00 PCS	WIPER BLADE D4D germany	550.00	2,200.00
5	1.00 SET	SOCKET RANGE (JAPAN) japan	5,500.00	5,500.00
6	2.00 SET	BRAKE PAD TOYOTA D4D VAN (GENUINE) bendix usa heavt duty	2,800.00	5,600.00
7	1.00 SET	BRAKE SHOE (TOYOTA D4D VAN) GENUINE bendix usa heavt duty	4,500.00	4,500.00
8	2.00 SET	BRAKE PAD NESSAN VAN 350 (GENUINE)	3,500.00	7,000.00
Sub-Total :				160,800.00

For Ambulance and Utility van of DDNH-Kapalong Zone	GRAND TOTAL : P 188,300.00
Grand Total Amount in Words : ONE HUNDRED EIGHTY-EIGHT THOUSAND THREE HUNDRED AND XX / 100	

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.

I hereby conform that **NOTICE TO DELIVER** shall be served to the **PLACE OF DELIVERY** stated herein **three (3) days before the actual delivery of the item/s covered by this Purchase Order.**

Conforme : _____ Very truly yours, _____

Rosy LL Alcanay
(Signature over printed name)

05-18-22
(Date)

Gale Guadalupe G. Mortillero
GALE GUADALUPE G. MORTILLERO, MSLRG, MHRM
Assistant Provincial Administrator (Administration)
EDWIN I. JUBAHIB
Governor

NOTE: This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.

ALEJANDRO R. OMILA JR.



PURCHASE ORDER

Supplier : FOREMOST AUTO CARE SERVICES	P.O. Number: 2022041618
Address : TAGUM CITY	 202202143873A5F
PhilGEPS Registration No. : 270599 Tel./Fax No. : 0925 1958459 Registration Certificate : DTI	Date : Apr 19, 2022 Mode of Procurement : Shopping B P.R. No. : 2022021438(Regular Purchase)
Req. Office : PEEDO - DDN Hospital (Kapalong Zone)	

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

Date of Delivery : _____ Payment Term : ON ACCOUNT	Delivery Term: 10 Calendar Days
Place of Delivery : PGSO Warehouse	

I.N.	Quantity/Unit	Item	Unit Cost	Amount
		usa heavt duty		
9	1.00 SET	BRAKE SHOE NESSAN VAN 350 (GENUINE)	5,500.00	5,500.00
		bendix usa heavt duty		
10	1.00 PC	CROCODILE JACK (JAPAN) 2 TONS	18,500.00	18,500.00
		japan		
11	1.00 SET	WARNING DEVICE	3,500.00	3,500.00
		taiwan heavy duty		

Remarks :
Please specify the brand.

The award is based on Abstract No. **0420221799** dated **April 05, 2022** under Quotation No. **20222061C** opened on **March 31, 2022**

Sub-Total : 27,500.00

For Ambulance and Utility van of DDNH-Kapalong Zone	GRAND TOTAL : P 188,300.00
Grand Total Amount in Words : ONE HUNDRED EIGHTY-EIGHT THOUSAND THREE HUNDRED AND XX / 100	

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.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme : _____ (Signature over printed name) _____ (Date)	Very truly yours, _____ GALE GUADALUPE G. MORTILLERO, MSLRG, MHRM Assistant Provincial Administrator EDWIN T. JUBAHIB Governor
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ALEJANDRO R. OMILA JR.