PURCHASE ORDER (PO)

Supplier	: FREEDOM COMMERCIAL PRINTERS	P.O. No.	:	14850
Address	: Gov. Ramos Road, Sta. Maria, Zamboanga City	Date	:	March 12, 2024
Email address	:	Mode of Procurement	:	Negotiated Procurement (Small Value)
Telephone No.	: 926-0048 / 09171187053			
TIN	:			

Gentlemen/Ladies :

Please furnish this Office the following articles subject to the terms and conditions contained herein.

Place of Delivery	: Human Resource Dept., ZCWD Main Office, Pilar St., Z.C.	Delivery Term	:	20-CD
Date of Delivery	:	Payment Term	:	

STOCK NO.	ITEM #	DESCRIPTION	QTY.	UOM	UNIT COST	AMOUNT
502999004	1	MUGS Specification: - Ceramic Material - 11 oz (325ml) capacity - Color White - With colored printing of ZCWD Anniversary Logo - Dimension: - Height: 9.6 cm - Outside diameter: 8.2cm - Handle: - Height: 7.2cm - Width: 4.0cm - Must be individually packed in a box	100	Pcs	Php 91.00	Php 9,100.00
	2	Umbrella Specification: - Material Nylon - Handle: J handle Plastic - With button snap - Ribs: Metal - Color: Navy Blue - No. of Bone: 8 bones - With colored printing of ZCWD Anniversary Logo - Must be individually packed in a plastic	100	pcs	Php 363.00	Php 36,300.00
		xxxxxxxxxxxxxxxxxxxxxxxxxxxxxx nothing follows xxxxxxxxxxxxxxxxxxxxxxxxxxxxxx (Details Attached) Purpose: To be raffled to ZCWD Customers in connection with the 50th Anniversary of the ZCWD. Note: Delivery of Items/Units must be accompanied with Original Copy of P.O., Charge Invoice or Credit Invoice for reference. Note: Warranty Period: 3 months for Expendable supplies after acceptance by the procuring entity. Price Validity: 120 CD Payment Terms: No COD				
Total Amount in Words		FORTY FIVE THOUSAND FOUR HUNDRED PESOS				Php 45,400.00

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one (1%) percent for every day of delay shall be imposed.

Very truly yours,

REYNALDO R. CABILIN, MPA
Acting General Manager

Conforme :

Vina E. David
Signature over Printed name of Supplier

03/14/24
Date

Funds Available :

ALOBS No. :
Amount :