



Republic of the Philippines
ZAMBOANGA CITY WATER DISTRICT
Zamboanga City

PURCHASE ORDER (PO)

| | | | |
|---------------|---|-------------|------------------|
| Supplier | : AJP GAS REFILLING GAS REFILLING STATION | P.O. No. | : 15068 |
| Address | : Zone 4, Brgy. Talabaan, Zamboanga City | Date | : March 31, 2025 |
| Email address | : | Mode of | : |
| Telephone No. | : 09265810911 | Procurement | : Negotiated |
| TIN | : | | : Procurement |
| | | | : (Small Value) |

Gentlemen/Ladies :
Please furnish this Office the following articles subject to the terms and conditions contained herein.

| | | | |
|-------------------|---|---------------|---------|
| Place of Delivery | : Property Section, ZCWD Motorpool, Pasonanca, Z.C. | Delivery Term | : 15-CD |
| Date of Delivery | : | Payment Term | : |

| STOCK NO. | ITEM # | DESCRIPTION | QTY. | UOM | UNIT COST | AMOUNT |
|--------------------|--------|---|------|-----|----------------|----------------|
| 502130600 104 8 | 1 | TRANSMISSION ASSY. (6SD1) Isuzu Engine (A1) BRAND & MODEL OFFERED: SURPLUS JAPAN xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx nothing follows xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx (Details Attached) Purpose: For repair of water tanker (SHY 265) Note: Delivery of Items/Units must be accompanied with Original Copy of P.O., Charge Invoice or Credit Invoice for reference. Note: Warranty Period: 1 Year for Non-Expendable supplies after acceptance by the procuring entity. Price Validity: 120 CD Payment Terms: No COD | 1 | Lot | Php 148,500.00 | Php 148,500.00 |

| | | |
|-----------------------|---|----------------|
| Total Amount in Words | ONE HUNDRED FORTY EIGHT THOUSAND FIVE HUNDRED PESOS | Php 148,500.00 |
|-----------------------|---|----------------|

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
General Manager

Conforme :


Signature over Printed name of Supplier

04-08-25
Date

| | | | |
|-------------------|---|-------------|---------------------|
| Funds Available : |  FRIZ P. MAINAR OIC - AFMD | ALOBS No. : | |
| | | Amount : | |
| | | P.R. No. | : 25-0031 |
| | | Date of PR | : February 04, 2025 |

This form should be prepared in 5 copies. Copy 1 - Original to be attached to Voucher for payment; Copy 2 - Accounting Section;
Copy 3 - BAC; Copy 4 - End Users; Copy 5 - File.