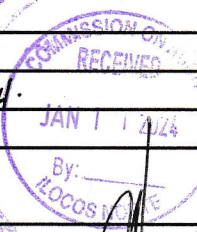




PURCHASE ORDER CITY OF BATAC

SUPPLIER COPY

Supplier: ABM-A BUILDER MARKETING	P.O. No: CMSD - 2023 - 11 - 009
Address: Laoag City	Date: NOV 09 2023
E-mail Address:	Mode of Procurement: PB
Telephone No.:	P.R. No: 100-2023 - 07 - 064
TIN: 111-816-932-000	Date: 7-21-23



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

Place of Delivery: _____ Delivery Term: **FOB destination, freight prepaid**

Date of Delivery: **w/in 30 days upon receipt of NTP** Payment Term: **n/120**

ITEM NO.	QTY	UNIT	DESCRIPTION	UNIT COST	AMOUNT
1	8	unit	Filing Cabinet, Swing Door, 5 layers HD	18,950.00	151,600.00
2	2	unit	Filing Cabinet, Swing Door, 5 layers	16,000.00	32,000.00
3	2	unit	Filing Cabinet, Lateral, 4 Drawers	15,000.00	30,000.00
4	1	unit	Filing Cabinet, Lateral, 5 Drawers HD	32,000.00	32,000.00
5	1	unit	Filing Cabinet, Vertical, 4 Drawers HD	18,000.00	18,000.00
6	3	unit	Filing Cabinet, Vertical, 4 Drawers	15,300.00	45,900.00
7	1	unit	Filing Cabinet, Vertical, 4 Layers, Full Extension Files; Wrinkle Brown	25,000.00	25,000.00
8	23	unit	Open Metal Shelves, Black, w-90cm, D-40cm, H-180 cm	16,000.00	368,000.00
9	2	unit	Open Metal Shelves, 5 layers	18,000.00	36,000.00
10	4	unit	Open Metal Shelves, 5 layers HD	25,000.00	100,000.00
(TOTAL AMOUNT IN WORDS) Eight Hundred Thirty-Eight Thousand Five Hundred pesos and 00/100					838,500.00

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

Very truly yours,

Conforme: _____
Albert D. Chua
 Signature Over Printed Name

 11-10-23
 Date (mm/dd/yyyy)

Albert D. Chua
ENGR. ALBERT D. CHUA
 City Mayor