



QUINTUPLICATE

No. 02-0151-2023-05-0230

PURCHASE ORDER

PMO-QF-17 17 Oct 2022

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Supplier:	a service of the	SONS REALTY & DEVELOPMENT CORPORATION	P.O. No. :	2023-05-0	DE MANY CONTRACTOR OF THE CONTRACTOR		
Address :	14th Lacson Street Bacolod City, Negros Occidental			Date: Mode of Procurement: AMP-NP 33.10 Reso No. 123 5, 2023			
TIN:							
Gentlemen:	MIN. IF	MAKK ALAYON (034) 433 1/31				1	
	Plea	se furnish this Office the following articles subject to the ter	ms and cond	litions contained	d herein:	+389 ⁽²⁾	
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Place of Delivery:	e of Delivery : L_M_A_Capricho (EUMB-AFETD)			Delivery Term: Payment Term: Payment will be process within 30 days upon-			
Date of Delivery :			Payment Te	 	mission of all requir	THE PARTY OF THE P	
	Manager St.		The state of the s	of certificate of ac List of <u>One and C</u>		end-uaer. Paymen nto and Davabis -	
Stock/Property No.	Unit	Description	Agaice to accounting	Quantity	Unit Cost	Amount	
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		ACCOMODATION FOR THE CONDUCT OF II	EC	One was lived	pide le l'isc		
	Was Co	CAMPAIGN ON ALTERNATIVE FUEL AND E		in samaladi -	NEW PROPERTY		
	Pare VIIII	 ENERGY TECHNOLOGY PROGRAM IN BAC CITY ON 22-25 MAY 2023 	OLOD				
		See attached Terms of Reference (TOR) and a	Anna mana	ation of an ac	Mulet Pine		
		Service Agreement for details	(\$1891 FTALLER)	1,000	prosedura ini		
		Service / Charles in the secure	in the part		AWOUNT F	215,000.00	
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(Total Amount in Wor	ds)	vo Flundred Fifteen Thousand Pesos Only					
	of failur	e to make the full delivery within the time specified above, a	a penalty of	one-tenth (1/10)	of one percent f	or every	
		e imposed on the underdelivered item/s.					
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Conforme:	- A	Very Truly yours:	N 10 10 10 10 10 10 10 10 10 10 10 10 10	De	V		
Very seem	KTOK	MANTACA .	AHULN	0	, ubbuill		
	Signature	over Printed Name of Supplier	ignature over	Printed Name of	Authorized Official		
		114-102 9192 For	Dire	ctor, EUMB			
		Date	7. 1943	Designation			
		Build					
Fund Cluster : _	63		ORS/BURS	No.:	(4):51.~ (6):1-	(t. c.) 2t	
Funds Available:			Date of the ORS/BURS:				
CHI No. 6	1 05.767	3	A STATE OF THE STA	to the factor	Tr		
Page 1 of		HELEN (ROLLINAN	Amount :				
OSM Office	S	ignature over Printed Name of Chief Accountant/Head of				الدي الدي	