



DEPARTMENT OF ENERGY

Energy Center, Rizal Drive cor. 34th St., Bonifacio Global City, Taguig

QUINTUPLICATE

PMD-QF-17
27 October 2023
Rev. 2

PR No. 01-0101-2024-05-0273

PURCHASE ORDER

Supplier : <u>THEO-PAM TRADING CORP.</u>	P.O. No. : <u>2024-08-256</u>
Address : <u>2825, Park Avenue, Barangay 075, Pasay City</u>	Date : <u>07-Aug-2024</u>
TIN : _____	Mode of Procurement : <u>AMP 53.9</u>

Gentlemen: MS. KRISTALLINE C. SALAZAR 8831 6463 Reso No. 321 s. 2024

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

Place of Delivery : <u>DEPARTMENT OF ENERGY, Energy Center, Rizal Dr., BGC, Taguig City</u> <u>R.M.C. Briones (ERTLS-GRFTLD)</u>	Delivery Term : <u>Ninety (90) days upon receipt of purchase order</u>
Date of Delivery : _____	Payment Term : <u>Payment will be processed within 30 days upon completion of services, submission of all required documents, & issuance of certificate of acceptance from the end-user. Payment is through LDDAP-ADA subject to government budgeting, accounting and auditing rules.</u>

Stock/Property No.	Unit	Description	Quantity	Unit Cost	Amount
		SUPPLY AND DELIVERY OF LABORATORY SUPPLIES AND MATERIALS			
	pcs.	Beaker, Glass, 3", 400 ml	75	275.00	20,625.00
		Other Terms and General Conditions: - as stated in the Request for Quotation (RFQ-01-D101-2024-05-0273-0614-0080)			
		<i>*Subject to deduction of allowed government taxes on total</i>			
				TOTAL AMOUNT	20,625.00

(Total Amount in Words) Twenty Thousand Six Hundred Twenty-Five Pesos only

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 on the underdelivered item/s.
This PO serves as the Notice to Proceed (NTP) when signed by the Supplier.

Conforme: KRISTALLINE C. SALAZAR Very Truly yours: AMELIA M. DE GUZMAN, CESO IV
Signature over Printed Name of Supplier Signature over Printed Name of Authorized Official

12 SEP 24 / 1170H Date mcb/DEBM FS Designation Director, ERTLS

Fund Cluster : _____	ORS/BURS No. : _____
Funds Available : _____	Date of the ORS/BURS: _____
<u>HELEN C. ROLDAN</u> Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit	Amount : _____

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