



DEPARTMENT OF ENERGY

QUINTUPLICATE

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

PMD-QE-17  
17 Oct 2022  
Rev. 0

PR No 02-0101-2023-07-0317

PURCHASE ORDER

Supplier : ROBINSONS LAND CORPORATION (GRAND SUMMIT GENERAL SANTOS)  
 Address : Artiola St., cor. Arradaza St., Lagao, General Santos City  
 TIN : \_\_\_\_\_

P.O. No. : 2023-08-217  
 Date : 18-Aug-2023  
 Mode of Procurement : AMP-NP 53.10  
 Basis No. 2023

Gentlemen: MS. SHARLENE JANE B. PEDROSO | 0947 992 1129

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

Place of Delivery : DEPARTMENT OF ENERGY, Energy Center, Rizal Dr., BGC, Taguig City  
A. S Barcelona (EPIMB-PMDD)

Date of Delivery : \_\_\_\_\_

Delivery Term : as per event's schedule

Payment Term : Payment will be process within 30 days upon completion of services, submission of all required documents & issuance of certificate of acceptance from the end-user. Payment is through List of Due and Demandable Accounts and Payable

Stock/Property No.	Unit	Description	Quantity	Unit Cost	Amount
		<p><b>PROCUREMENT FOR THE VENUE, MEALS, ACCOMMODATIONS FOR THE CONDUCT OF IEC AND PUBLIC CONSULTATION ON THE DECLARATION OF THE COMMERCIAL OPERATIONS DATE RCOA AND GEOP IN MINDANAO IN GENERAL SANTOS CITY</b></p> <p>See attached Terms of Reference (TOR) and approved Service Agreement for details</p> <p><i>*Subject to deduction of allowed government taxes on the total amount</i></p>			
<b>TOTAL AMOUNT ₱</b>					<b>240,250.00</b>

(Total Amount in Words) Two Hundred Forty Thousand Two Hundred Fifty 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.

Conforme: JHARKENE JANE PEDROSO  
ROBINSONS LAND CORPORATION  
 Signature over Printed Name of Supplier

Very Truly yours: IRMA C. EXCONDE  
 Signature over Printed Name of Authorized Official  
 Director, EPIMB

\_\_\_\_\_ Date \_\_\_\_\_ Designation \_\_\_\_\_

Fund Cluster : \_\_\_\_\_

Funds Available : \_\_\_\_\_

ORS/BURS No. : \_\_\_\_\_

Date of the ORS/BURS: \_\_\_\_\_

Amount : \_\_\_\_\_

HEYEN C. ROLDAN  
 Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit