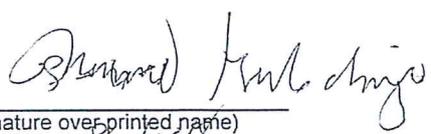


**PURCHASE ORDER**  
DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT  
Batasan Pambansa Complex, Constitution Hills, Quezon City

# 708

Supplier		BAN BEE COMMERCIAL CO., INC.		PO No.		2018-07-0683		
Address		856 C.M Recto Ave., Tondo Manila		Date		July 11, 2018		
Tel. No.		244-3724 / Fax: 244-3728		Mode of Procurement		Shopping (B)		
PhilGEPS No.		2001-2151 ✓						
TIN:		001-609-075-000						
Gentlemen: <span style="float: right;">JIM</span> Please furnish this office the following articles subject to the terms and conditions contained herein:								
Place of Delivery:			DSWD-PS Warehouse, DSWD Central Office, IBP Road, Batasan Hills, Quezon City		Delivery Term:		within Seven (7) working days upon receipt of the P.O. ✓	
Date of Delivery					Payment Term:		Fifteen (15) to Thirty (30) days upon final inspection and acceptance	
Stock / Property No.	Unit	Description			Quantity	Unit Amount	Amount	
1	piece	File Storage Box, 15" x 12" x 10", with cover (Roxan)			180 ✓	90.00 ✓	16,200.00	
2	piece	Folder, Vinyl, Expanding, Legal size, Assorted Colors			20 ✓	35.00 ✓	700.00	
3	piece	Sign. Pen, Green (MyGel)			100 ✓	20.00 ✓	2,000.00	
4	pad	Note Pad, 2" x 2", 100 sheets/pad (3M)			8 ✓	130.00 ✓	1,040.00	
5	bundle	Ring Binder, 19mm x 1.12m (3/4" x 44"), Plastic, 10 pcs/bundle xxxxxxxx-Nothing Follows-xxxxxxxx			2 ✓	170.00 ✓	340.00	
Charged to: GASS (FMS) Fund PR Nos. 2018020500, 2018041003 AOQ No. 18-0582 Shopping (B) ✓ 1st Quarter Supplies								
(Total Amount in Words)		Twenty Thousand Two Hundred Eighty Pesos Only					P	20,280.00 ✓
In case of failure to make full delivery within the time specified above, the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.								
Conforme:  _____ (Signature over printed name)				Very truly yours,  WAYNE C. BELIZAR Director, FMS Agency Head/Authorized Representative				
_____ Date								
Fund Cluster: <u>100000-1-1</u> Funds Available: <u>₱20,280.00</u>				ORS/BURS No.: <u>02-101101-7012-07-08266</u> Date of the ORS/BURS: <u>100000-1-1</u> Amount: <u>₱20,280.00</u>				
 <b>JUBIE LEAH MAE S. COLES</b> Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit								