



DEPARTMENT OF EDUCATION
Region V
Division of Camarines Sur
San Jose, Pili, Camarines Sur
Fax No.: 871-33-42

COMMISSION ON AUDIT
(Dep Ed Camarines Sur Division)

Received by:



[Handwritten Signature]

24 AUG 2018

Date Received:

PURCHASE ORDER

Supplier: SILICON VALLEY (SM NAGA)
Address: SM CITY NAGA
TIN:

P.O. No: 2018-08-072

Date: **AUG 22 2018**

Mode of Procurement:

Shopping under Section 52.1(b)

Gentlemen:

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

| Place of Delivery: DepED, Division of Camarines Sur, San Jose, Pili, Camarines Sur | | | | Delivery Term: 15 DAYS | |
|--|--------|---|----------|------------------------|-----------|
| Date of Delivery: | | | | Payment Term: 15 DAYS | |
| Stock/ Property No. | Unit | Description | Quantity | Unit Cost | Amount |
| | | SUPPLY AND DELIVERY OF I.T. EQUIPMENT & CONSUMABLES FOR SCHOOL HEALTH SECTION | | | |
| | unit | Computer printer, L360 | 1 | 7,500.00 | 7,500.00 |
| | bottle | Bottomless ink, black, T6641 | 10 | 245.00 | 2,450.00 |
| | bottle | Bottomless ink, cyan, T6642 | 3 | 245.00 | 735.00 |
| | bottle | Bottomless ink, magenta, T6643 | 3 | 245.00 | 735.00 |
| | bottle | Bottomless ink, yellow, T6644 | 3 | 245.00 | 735.00 |
| | | TOTAL | | | 12,155.00 |
| (Total Amount in Words) | | | | | |
| TWELVE THOUSAND ONE HUNDRED FIFTY-FIVE PESOS ONLY*** | | | | | |

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

Conforme:

[Handwritten Signature]
Signature over Printed Name of Supplier

AUG 23 2018

Date

Very truly yours,

[Handwritten Signature]

CECILLE BERNADETTE P. RIVERA, CESO V

Authorized Official
Schools Division Superintendent
Designation

Fund Cluster: _____

Funds Available: _____

ORS/BURS NO: 18-08-03253

Date of the ORS/BURS: 8/15/18

AMOUNT: 12,155.00

[Handwritten Signature]
GERLIE V. CAÑAS
Division Accountant