PURCHASE ORDER SLSU-Sogod Main Campus Entity Name

Teodory	Supplier: Teodorwil's School and Office Supplies			P.O. No. : 2020-03-0 193-1 Negotiated		
Address : Sogod			Date: March 23, 2020 Procurement:			
TIN: 009-571-526-001			Mode of Procurement:			
1:						
nish this C	Office the following articles subject to the	terms and cor	nditions contain	ed herein:		
Place of Delivery:		Delivery Term :				
Date of Delivery:		Payment Term:				
Stock/ roperty Unit Description Quantity U						
Unit	Description	Quantity	Unit Cost	Amount		
rm	PVC Acetate A4	2	1,000.00	2,000.00		
3-0158A	PPE production against COVID-19					
Total Amount in Words:		2,000.00				
				f one-tenth (1/10)		
Conforme:			Very truly yours			
Teodorwil's School and Office Supplies			SUSANA B. CENIZA			
Signature over Printed Name of Supplier			Signature over Printed Name of Authorized Official			
03/23/2020 Date			Administrative Officer V Designation			
Fund Cluster:			ORS/BURS No.:			
CHRISTINE ALMA MAE W. DAGUPLO, CPA Accountant III Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit			Amount:			
	Sogod 0-571-526 1: nish this Celivery: livery: Unit rm 3-0158A 10unt in ds: cent for every forme: Adorwil' Signature Signature CHRIS	Sogod -571-526-001 inish this Office the following articles subject to the elivery: livery: Unit Description rm PVC Acetate A4 3-0158A PPE production against COVID-19 Tount in ds: of failure to make the full delivery within the time ent for every day of delay shall be imposed on the forme: # /478 #/480 dorwil's School and Office Supplies Signature over Printed Name of Supplier 03/23/2020 Date CHRISTINE ALMA MAE #1. DAGUPLO, CPA Accountant III Signature over Printed Name of Chief	Date: Ma Joseph	Date: March 23, 2020 Mode of Procurement: It inish this Office the following articles subject to the terms and conditions contain Elivery: Unit Description Quantity Unit Cost rm PVC Acetate A4 2 1,000,00 Two thousand pesos For of failure to make the full delivery within the time specified above, a penalty of tent for every day of delay shall be imposed on the undelivered item/s. Form: # 1/478 #/480 dorwil's School and Office Supplies Signature over Printed Name of Supplier Designative ORS/BURS No.: Date ORS/BURS No.: Date ORS/BURS No.: Date of the ORS/BURS Amount: ** CHRISTINE ALMA MAE # DAGUPLO, CPA Accountant III Signature over Printed Name of Chief		