Republic of the Philippines
Department of Agriculture
AGRICULTURAL TRAINING INSTITUTE
Regional Training Center XIII
Los Angeles, Butuan City 8600
Mobile No. Globe 09453296484 / Smart 09293546355

COMMISSION ON AUDIT
DA-RFU NO.XIII
RECEIVED
DATE 2/22/24 TIME 11:00
BY:
OFFICE OF THE AUDITOR, BUT. CITY
TO BE REVIEWED DURING POST-AUDIT

PURCHASE ORDER

Supplier :	Erzalan Printing Press	P.O. No. :	24-02-071
Address :	#45 Cotabato St., Luzviminda Village, Batasan Hills, Quezon City	Date :	2/20/2024
TIN :	227-537-730-00000-VAT	Mode of Procurement :	Small Value

Gentlemen:

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

Place of Delivery :	ATI-RTC 13, Los Angeles, Butuan City	Delivery Term :	Free Delivery
Date of Delivery :	30 calendar days upon receipt	Payment Term :	30 days upon complete delivery

No.	Unit	Description	Quantity	Unit Cost	Amount
1	piece	Three-fold IEC, A4 size, Colored, Glossy Type, C25#80 - back to back laser printing *11 design x 600 pcs each = 6,600 Total	6600	10.23	67,518.00
		Brochure-type IEC, C2S120 paper (for inside pages only), front & back cover, 200 gsm thick and matte, size: 5.5 x 8.5 inch			
2	piece	Hybridization, 20 pages	740	110.00	81,400.00
3	piece	IPM Diseases, 12 pages	700	95.00	66,500.00
4	piece	IPM Pests, 8 pages	700	85.00	59,500.00
		Note: *Supplier should provide a representative for face-to-face coordination *Should be available 30 Calendar Days upon awarding *Prototype must be approved before mass production xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx for CFIDP IEC Materials			
Total Amount in Words:		Two Hundred Seventy Four Thousand Nine Hundred Eighteen Pesos Only			**274,918.00**

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 undelivered item/s.

Conforme:

ERLINDA E. PUNZALAN/Proprietor
Signature over Printed Name of Supplier
February 22, 2024
Date

Very truly yours,

JESSIE V. BELDIA, PhD
Signature over Printed Name of Authorized
OIC - Center Director
Designation

Fund Cluster : _____
Funds Available : _____

FRANCIS H. IRIARTE, CPA, MPA
Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit

ORS/BURS No. : _____
Date of the ORS/BURS: _____
Amount : _____