

PURCHASE ORDER

Department of Justice
Agency

Supplier: <u>Bierich General Merchandise</u> Address: <u>1076, 3rd St., Our Lady's Village, Legazpi City</u> TIN : <u>261-752-421-000</u> Contact No. <u>0905-267-3636</u>	P.O. No.: <u>2020-12-030</u> Date : <u>12/22/2020</u> Mode of Procurement: <u>Negotiated Procurement</u> <u>Small Value Procurement (53.9)</u>
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Gentlemen:

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


Place of Delivery: <u>RPO V, Rawis, Legazpi City</u>	Delivery Term: <u>FOB Destination</u>
Date of Delivery: <u>December 29, 2020</u>	Payment Term: <u>N/30</u>

Stock No.	Unit	DESCRIPTION	Quantity	Unit Cost	AMOUNT
	Unit	Non-contact Thermal scanner, with stand or can be wall mounted	20	2,350.00	47,000.00
	Piece	Disposable Surgical Face Mask, 3 ply	10,000	2.99	29,900.00
	Bottle	Alcohol, Isopropyl, 500ml	1,920	162.00	311,040.00
	Bottle	Disinfectant spray	300	295.00	88,500.00
	Piece	Face shield, whole face coverage, easy to disassemble	294	28.00	8,232.00
	Piece	Personal Protective Equipment (PPE), can fit to men and women, washable	163	438.00	71,394.00

FIVE HUNDRED FIFTY-SIX THOUSAND AND SIXTY-SIX PESOS ONLY.	556,066.00
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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:




 Signature over Printed Name of Supplier

 12/23/20

 Date

Very truly yours,


MARY MAX B. DE LEOZ

 Signature over Printed Name of Authorized Official
 Regional Prosecutor

 Head of the Procuring Entity

Fund Cluster: _____
 Funds Available: _____

 Signature over Printed Name of Chief Accountant/Chief Accountant/Head of Accounting Division/Unit

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