



# PURCHASE ORDER

## BUREAU OF THE TREASURY

Intramuros, Manila

Telefax No.: 524-7008

Appendix 61

Supplier :	<b>FABRIMETRICS PHILS., INC.</b>	P.O. No. :	<b>2023-06-0119</b>
Address :	No. 1 Candido St., San Agustin Village, Brgy. Talipapa, Quezon City	Date :	June 6, 2023
Contact No.:	0998-868-5985, 8930-2757	Mode of Procurement :	Small Value Procurement
Email Add.:	cbanes@fabphils.com		
TIN:	002-437-636-000		

Gentlemen:

Please proceed with the Supply and Delivery of Various Tents and Furniture for the Bureau of the Treasury's Command Center in the amount of Php43,550.00 (VAT inclusive) following the terms and conditions contained herein:

Place of Delivery :	Ayuntamiento Building, Intramuros, Manila	Delivery Term:	Within Two (2) calendar days
Date of Delivery:	-	Payment Term :	30 days upon delivery

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
	lot	<b>SUPPLY AND DELIVERY OF VARIOUS TENTS AND FURNITURE FOR THE BUREAU OF THE TREASURY'S COMMAND CENTER</b> , composed of the following:	1	-	-
	sets	<b>Retractable Pop-Up Canopy Tent</b> , 3m x 3m	2	2,600.00	5,200.00
	set	<b>Retractable Pop-Up Canopy Tent</b> , 3m x 6m	1	4,600.00	4,600.00
	pcs.	<b>Modular Isolation Tent</b> , 2.4m x 2.4m x 1.6m	4	3,500.00	14,000.00
	pcs.	<b>Folding Bed</b>	5	2,450.00	12,250.00
	pcs.	<b>Folding Table</b>	3	2,500.00	7,500.00
		<b>---Nothing Follows---</b>			
		<b>TOTAL</b>			<b>43,550.00</b>

**(Total Amount in Words): FORTY THREE THOUSAND FIVE HUNDRED FIFTY PESOS AND (00/000)**

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:

Very truly yours,

\_\_\_\_\_  
Signature over Printed Name of Supplier

**ATTY. RAYMUNDO U. TAN (Sgd.)**

Signature over Printed Name of Authorized Official

\_\_\_\_\_  
Date

OIC, Administrative Service  
Designation

Fund Cluster : \_\_\_\_\_

Funds Available : \_\_\_\_\_

**ROWENA R. GAMBA (Sgd.)**

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

ORS/BURS No. : \_\_\_\_\_

Date of the ORS/BURS: \_\_\_\_\_

Amount : \_\_\_\_\_