PURCHASE ORDER

BUREAU OF THE TREASURY
Intramuros, Manila
Telefax No.: 524-7008

Funding the Republic

Supplier :	**INTEGRATED COMPUTER SYSTEMS, INC.**	P.O. No. :	**2024-04-0066**
Address :	303 Limketkai Bldg., Ortigas Ave., Greenhills, San Juan City	Date :	April 15, 2024
Contact No.:	8 689-5000	Mode of Procurement :	Negotiated Procurement
Email Add.:	afiango-ok@ics.com.ph		
TIN:	000-055-626-000		

Gentlemen:

Please proceed with the Supply and Delivery of One (1) Lot Various Computer Parts for the Upgrade of the Bureau of the Treasury's Workstations in the amount of Php995,345.00 (VAT inclusive) following the terms and conditions contained herein:

Place of Delivery :	Ayuntamiento Building, Intramuros, Manila	Delivery Term:	Within Sixty (60) calendar days form the receipt of approved PO
Date of Delivery:	-	Payment Term :	30 days upon delivery

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
	lot	**SUPPLY AND DELIVERY OF ONE (1) LOT VARIOUS COMPUTER PARTS FOR THE UPGRADE OF THE BUREAU OF THE TREASURY'S WORKSTATIONS,** composed of the following:	1	**-**	**-**
	units	**RANDOM ACCESS MEMORY (RAM),** 4GB, conforms to the attached terms of reference	163	1,290.00	210,270.00
	units	**RANDOM ACCESS MEMORY (RAM),** 8GB, conforms to the attached terms of reference	70	1,610.00	112,700.00
	units	**SOLID STATE DRIVE (SDD)**, conforms to the attached terms of reference	163	4,125.00	672,375.00
		---Nothing Follows---			
		Reference: PR No. 2024-03-0119 For the HMD			
		TOTAL			**995,345.00**

(Total Amount in Words):   NINE HUNDRED NINETY-FIVE THOUSAND THREE HUNDRED FORTY-FIVE 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:

_____
Signature over Printed Name of Supplier

_____
Date

Very truly yours,

ATTY. RAYMUNDO U. TAN (Sgd.)
Signature over Printed Name of Authorized Official

Director III, 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 : _____