



Funding the Republic

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



Supplier : <b>LIGHT PLAN, INC.</b>			P.O. No. : <b>2024-12-0205</b>		
Address : 8M St. Peter Hilltop St., Kaunlaran, Quezon City			Date : December 27, 2024		
Contact No.: 09178546543; 79038018			Mode of Procurement : Negotiated Procurement		
Email Add.: jinkie@lightplaninc.com; info@lightplaninc.com					
TIN: 007-872-531-00000					
Gentlemen: Please proceed with the Procurement of Architectural Lighting Design Services for Ayuntamiento De Manila in the amount of Php980,000.00 (VAT inclusive) following the terms and conditions contained herein:					
Place of Delivery : Ayuntamiento Building, Intramuros, Manila Date of Delivery: -			Delivery Term: Within Ninety (90) calendar days from the receipt of approved PO Payment Term : 30 days		
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
	lot	<b>PROCUREMENT OF ARCHITECTURAL LIGHTING DESIGN SERVICES FOR AYUNTAMIENTO DE MANILA</b>  <b>---Nothing Follows---</b>  Reference: PR No. 2024-12-0452 For the GAD Focal Point System	1	980,000.00	980,000.00
		<b>TOTAL</b>			<b>980,000.00</b>
		<b>(Total Amount in Words): NINE HUNDRED EIGHTY THOUSAND PESOS AND (00/000)</b>			
<p>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.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p>Conforme:</p> <div style="border-bottom: 1px solid black; margin-top: 10px; width: 80%;"></div> <p style="text-align: center;">Signature over Printed Name of Supplier</p> <div style="border-bottom: 1px solid black; margin-top: 10px; width: 80%;"></div> <p style="text-align: center;">Date</p> </div> <div style="width: 45%;"> <p>Very truly yours,</p> <p style="text-align: center;"><b><u>ATTY. RAYMUNDO U. TAN (Sgd.)</u></b></p> <p style="text-align: center;">Signature over Printed Name of Authorized Official</p> <p style="text-align: center;">Director III, Administrative Service Designation</p> </div> </div>					
Fund Cluster : _____ Funds Available : _____  <p style="text-align: center;"><b><u>ROWENA R. GAMBA (Sgd.)</u></b></p> <p style="text-align: center;">Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit</p>			ORS/BURS No. : _____ Date of the ORS/BURS: _____ Amount : _____		