



Funding the Republic

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



Supplier : JMS TECHNOLOGY AND SUPPLIES			P.O. No. : 2025-04-0055		
Address : B-2 L-9 VM Townhomes, Putatan, Muntinlupa City			Date : April 07, 2025		
Contact No.: 0995-378-4261			Mode of Procurement : Negotiated Procurement		
Email Add.: joseph@jmsph.net					
TIN: 909-472-196-000					
Gentlemen: Please proceed with the Procurement of One (1) Year Preventive Maintenance of the Security Surveillance System of the Ayuntamiento Building for FY 2025 in the amount of Php384,384.00 (VAT inclusive) following the terms and conditions contained herein:					
Place of Delivery : Ayuntamiento Building, Intramuros, Manila			Delivery Term: Within One (1) Year for receipt of approved Purchase Order		
Date of Delivery: -			Payment Term : 30 days		
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
	lot	PROCUREMENT OF ONE (1) YEAR PREVENTIVE MAINTENANCE OF THE SECURITY SURVEILLANCE SYSTEM OF THE AYUNTAMIENTO BUILDING FOR F. Y. 2025 <i>---Nothing Follows---</i> Reference: PR No. 2025-01-0006 For the FMD	1	384,384.00	384,384.00
		TOTAL			384,384.00
(Total Amount in Words): THREE HUNDRED EIGHTY-FOUR THOUSAND THREE HUNDRED EIGHTY-FOUR PESOS AND (00/000)					
<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> <p style="text-align: center;">_____ Signature over Printed Name of Supplier</p> <p style="text-align: center;">_____ Date</p> </div> <div style="width: 45%;"> <p>Very truly yours,</p> <p style="text-align: center;"><u>ATTY. RAYMUNDO U. TAN (Sgd.)</u></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 : _____			ORS/BURS No. : _____ Date of the ORS/BURS: _____ Amount : _____		
<u>ROWENA R. GAMBA (Sgd.)</u> Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit					