



Republic of the Philippines  
**PROVINCE OF ISABELA**  
**PURCHASE ORDER**

DATE: \_\_\_\_\_  
 BY: \_\_\_\_\_

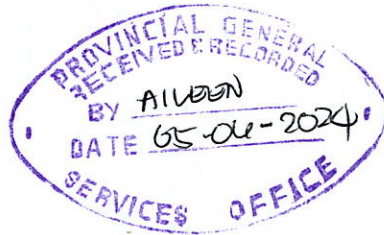
Supplier : **A.CUSIPAG ELECTRICAL AND MEDICAL EQUI**  
 Address : **Tuguegarao, City**

P.O. No. : 2024-05-0084  
 Date : 05-06-2024

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


Place of Delivery : \_\_\_\_\_ Delivery Term : \_\_\_\_\_  
 Date of Delivery : \_\_\_\_\_ Payment Term : \_\_\_\_\_



Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	JOB	2	Repair, preventive maintenance and calibration of One (2) Unit Blood Bank Refrigerator SCOPE OF WORK: -For functioning check up -For preventive maintenance -For calibration -Testing and commissioning	23,400.00	46,800.00
2	JOB	2	Repair, preventive maintenance and calibration of One (2) Unit Dri Bath Digisystem & Vortex mixer SCOPE OF WORK: -For functioning check up -For preventive maintenance -For calibration -Testing and commissioning ***** <i>nothing follows</i> *****	6,500.00	13,000.00



**(Total Amount in Words)** Fifty-nine Thousand Eight Hundred Pesos Only. **59,800.00**

In case of the 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.

Conforme :  
  
**A.CUSIPAG ELECTRICAL AND MEDICAL EQUIPMENT REPAIR**  
 (Signature over printed name)  
5-6-24  
 Date

Very truly yours :  
  
**RODOLFO T. ALBANO III**  
 Governor 

In case of negotiated purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished).  
 Approved per Sanggunian Resolution No.: \_\_\_\_\_

Certified Correct : \_\_\_\_\_ Date : \_\_\_\_\_