



PROVINCE OF ISABELA
PURCHASE ORDER

DATE: _____
BY: _____

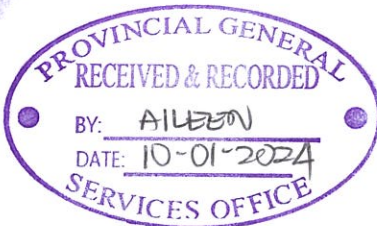
Supplier **MAXIMILIAN HOTELS AND RESORTS INC**
Address **Cauayan City, Isabela**

P.O. No.: **2024-10-0185 (6)**
Date: **10-01-2024**

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

Place of Delive _____ Delivery Term: _____
Date of Delivery: _____ Payment Term: _____

Item No.	Unit	Quantity	Description	Unit Cost	Amount
1	45	pax	Board and lodging (Meals and PM snack)	2,200.00	99,000.00
2	45	pax	2 Meals and snacks	750.00	33,750.00



one hundred thirty-two thousand seven hundred fifty P **132,750.00**

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.

Very truly yours,

HON. RODOLFO T. ALBANO III
Governor

Conforme:
MAXIMILIAN HOTELS AND RESORTS INC
(Signature over printed name)
10/02/24
(Date)

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: _____

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