



PROVINCE OF ISABELA
PURCHASE ORDER

DATE: _____
BY: _____

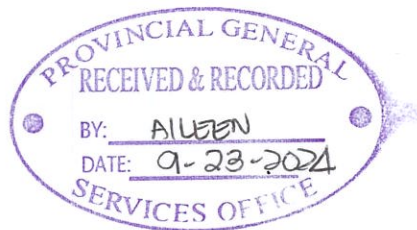
Supplier **TINGKAD DIGITAL PRINTING SERVICES**
Address **Guinatan, City of Ilagan, Isabela**

P.O. No.: **2024-09-0179 (8)**
Date: **09-23-2024**

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	90	pcs	Canvass bag	200.00	18,000.00
2	90	pcs	Kids Advocacy shirt	300.00	27,000.00
3	10	pcs	Roll-up banner for health program	1,500.00	15,000.00



Sixty thousand pesos P **60,000.00**

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:

TINGKAD DIGITAL PRINTING SERVICES

(Signature over printed name)

11/2/24

(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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