



PURCHASE ORDER

1 Supplier/Provider: PRONET SYSTEMS NETWORK SOLUTIONS : INC.		2 P. O. Number: 2021-11-0168	
Address: #33 West Ave. Quezon City		Date: 11/04/2021	
Tel./Fax No.: 376-6616 to 18		P.R. No.: 2021-08-0097	
TIN: 005-199-272-000		Date: 8/24/2021	
		Mode of Procurement: Shopping (B)	

3
Gentlemen:
Please furnish this Office the following articles subject to the terms and conditions contained herein

Item No.	Stock No.	Qty	Unit	Item Description	Cost	
					Unit	Total
1		25	piece	Wireless Earphones with Microphone	P 2,929.00	P73,225.00
2		25	piece	External Hard Drive	P 4,889.00	P122,225.00
3		25	piece	Powerbank	P 895.00	P22,375.00
4		3	can	Paper Shredder	P 6,823.00	P20,469.00
5		25	set	Laptop Cleaning Kit	P 479.00	P11,975.00
6		25	piece	Universal Outlet Extension Cord with Individual Switch - 4 Gang	P 625.00	P15,625.00
7		1	piece	Three-Step Folding Stool	P 1,220.00	P1,220.00
Nothing Follows						

Amount in Words: Two Hundred Sixty-seven Thousand One Hundred Fourteen Pesos Only	Total: P267,114.00
	*Subject to Applicable Taxes
	GROSS P 267,114.00

4 Place of Delivery: <u>PCC</u>	Delivery Term: <input type="checkbox"/> - Pick-up <input checked="" type="checkbox"/> - Deliver w/in 15 working days from receipt of PO
Date of Delivery/Completion:	Payment Term: <input type="checkbox"/> - COD <input checked="" type="checkbox"/> <u>15</u> - Days after delivery

Note: All materials replaced during the repair job shall be surrendered upon delivery of equipment to facilitate processing of payment. Unless otherwise indicated, the above terms and conditions are deemed accepted and form part thereof.

5 Penalty Provision:
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,
Conforme:
RACELLE ANN CAPISTRANO
 Supplier signature over printed name
 Date: 11/16/2021
KENNETH V. TANATE, PhD
 Executive Director and Head of the Procuring Entity
 Date: _____

6 Funds Available: REUBEN JONATHAN P. MONTENEGRO Chief Accountant, FPMO-AD	7 Amount : _____ ALOBS No.: _____ Date : _____ _____
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