



PROPERTY TRANSFER REPORT

Entity Name: **DepEd Central Office**

Fund Cluster: _____

From Accountable Officer/Agency/Fund Cluster:

DepEd Central OfficePTR No.: **OHK-SME-20-03-572**

To Accountable Officer/Agency/Fund Cluster:

DepEd Division of CaviteDate: **March 4, 2020****DepEd Region IV-A**

Transfer Type: (check only one)

☐ Donation☐ Relocate☐ Reassignment☒ Others (Specify)

Direct Delivery to:

School Name: **Luis Y. Ferrer Jr. Senior High School**School ID: **342285**

Date Acquired	Property No.	Description	Amount	Condition of PPE
		Mass Production Items (Cabinets)		
		1.) Cookery (NC II) - Cabinet Design 2 - 6 unit/s @ 32,548.16 per unit	195,288.96	Very Good Condition
		2.) Cookery (NC II) - Cabinet Design 4 - 3 unit/s @ 12,575.87 per unit	37,727.61	Very Good Condition
		3.) Cookery (NC II) - Cabinet Design 5 - 9 unit/s @ 5,928.62 per unit	53,357.58	Very Good Condition
		4.) Food and Beverage Services (NC II) - Cabinet Design 6 - 6 unit/s @ 14,972.44 per unit	89,834.64	Very Good Condition
		5.) Shielded Metal Arc Welding (NC I and NC II) - Work bench - 4 unit/s @ 22,344.20 per unit	89,376.80	Very Good Condition
TOTAL			₱465,585.59	

Reason for Transfer:

To transfer accountability.

Project: SUPPLY, DELIVERY, INSTALLATION, CONFIGURATION, TESTING, COMMISSIONING, TRAINING, AND MAINTENANCE FOR 9,069 TECHNICAL-VOCATIONAL-LIVELIHOOD(TVL) PROGRAMS OF 2,195 TVL SENIOR HIGH SCHOOLS

Contract/Purchase Order No.: 2018-10-BLR4(003)-BV-CB022-C092

Supplier: Quanzhou Huahui Kitchenware Co., Ltd.

Signature:	Approved by:	Released/Issued by:	Received by:
Printed Name:	Maritess L. Ablay		RANON F. BONBON
Designation:	Chief Administrative Officer Asset Management Division		School Property Custodian
Date:			10-26-2021

INSPECTION AND ACCEPTANCE REPORT

Date of Contract: December 27, 2019

Purchasing Office/Dept./Unit: Department of Education-Bureau of Learning Resources

Luis Y. Ferrer Jr. Senior High School CITY OF GENERAL TRIAS 342285

(Name of District Office or School) (Address & Tel. No. of District Office or School) (School ID)

Cavite

Region IV-A

INSPECTION		ACCEPTANCE	
date format: Jan-31-2020		date format: Jan-31-2020	
Date Inspected: _____ Inspected, verified and found OK as to quantity and specifications. 1. _____ 2. _____ Signature over printed Name Signature over printed Name _____ Designation Designation		Date Received : <u>10-26-21</u> Complete : <input checked="" type="checkbox"/> (Check box) Partial : <input checked="" type="checkbox"/> (Check box) _____ Signature over Printed Name/Designation (Check box) <input checked="" type="checkbox"/> Property Custodian <input type="checkbox"/> Supply Officer <input type="checkbox"/> Authorized Official: _____ _____ Designation	
Remarks by Inspection Officers: (Pls. check appropriate box) <input type="checkbox"/> Quantity in accordance with Master Packing List <input type="checkbox"/> Quantity not in accordance with Master Packing List <input type="checkbox"/> In good order and condition Remarks: _____		Remarks by Accepting Officer: (Please check appropriate box) <input type="checkbox"/> Quantity in accordance with Master Packing List <input type="checkbox"/> Quantity not in accordance with Master Packing List <input type="checkbox"/> In good order and condition Remarks: _____	

FOR THIRD PARTY MONITORS:

Quantity in accordance with Master Packing List (Pls. check box)

Quantity not in accordance with Master Packing List (Pls. check box)

In good order and condition

Poor condition

or PTCA Officer:



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