300, Bohol,

City, 6300

Receiving Report

Page .

February 23,2024

Shipment No. SM-RR0046776

Vendor Inv No. TDS NO-24001547 .

No.	Description	Quantity U	nit of leasure	Conversion Factor	
111068	MARCELA FRESH EGGS MEDIUM	60 T	RAY		30
111038	MARCELA FRESH EGGS LARGE	24. T	RAY		30

Pay-to Address
Pay-to Vendor No. S2954
MFI POULTRY DIVISION

LOURDES CORTES BOHOL

IOVELLE SIN BLANTE

Run Time & Date: 3/14/2024 8:30:03 AM

Checked by

Approved by:

DEROSE SEVARE SE

MFI Poultry Layer Division

Lourdes, Cortes, Bohol **Temporary Delivery Slip**

Page 1/ 1

Type: Delivery

FMS-00121 - ALTA CITTA	SUPERMARKET
PTRY - MFI-POULTRY - L	AYER DIVISION

VICENTE PIQUERO

/ RMN 644

eference #:0176240

er/Truck :

Payment Terms: 30 Days

Due Date: 03/24/2024

TDS No. :

Receipt Date

24001547 02/23/2024

Item Code	Description		Quantity	Unit	Price	Gross Amount	Disc.	Net Amount
00000004	LARGE EGG		60.000	TRAY	245.00	14,700.00		14,700.00
00000005	MEDIUM EGG		24.000	TRAY	235.00	5,640.00		5,640.00
FILE CONTRACTOR OF SECTION AND			Gross Total DHD >>>				20.240.00	

Freight and Handling >>> VAT

Gross Total PHP >> Total Discount PHP >>>

Discount:

203.40 Net Total PHP >>>

ure over Printed name)

203.40 20.136.60

Remarks ! Na

Prepared Bye. GRACE BOISER Checked By: RAQUEL POCOT Re-check 1561

Bimadula (Signature over Printed name)

Delivered By: (Driver)

Customer Representative

(Signature over Printed name) Time:

(Signature over Printed name) Date: Time:

Date Time: Designation

Time: DesignationDate:

Designation

Designation Designation Inventory and Invoicing System -LIVE

Note: This Document is not valid without complete signatory

Run Date: 02/22/2024 Run Time: 14:14:37

Run Date/Time: 02/22/2024 02:14:48 PM

DELIVERY PACK ACCTG(DPA)

2400 TDS No. :

DELIVERY PACK DELIVERED RETURNED DEPOSIT (SHORT)/OVER REMARKS ACCTG(DPA) QTY QTY QTY UNIT COST AMOUNT TRAY - CARTON 98 3.15 EGG CRATES P 450.00 Checked By:

Prepared By:

Designation

GRACE BOISER .

(Signature over Printed name) Date: Time:

(Signature over Printed name)

Date: Time: Designation Noted By:

(Signature over Printed name Date:

Time: Designation

Note: This Document is not valid without complete signatory