

PURCHASE ORDER

DEPARTMENT OF SCIENCE AND TECHNOLOGY - IX

Entity Name

Supplier : _____ Address : _____ TIN : _____	P.O. No. : _____ Date : _____ Mode of Procurement : _____
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Gentlemen:

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

Place of Delivery : _____ Date of Delivery : _____	Delivery Term : _____ Payment Term : _____
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Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount

(Total Amount in Words)

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 on the undelivered item/s.

Conforme:

Very truly yours,

Signature over Printed Name of Supplier

Signature over Printed Name of Authorized Official

Date

Designation

Fund Cluster : _____

Funds Available : _____

Signature over Printed Name of Chief Accountant/Head of
Accounting Division/Unit

ORS/BURS No. : _____

Date of the ORS/BURS: _____

Amount : _____