

City Government of Baguio

Purchase Order

POSTING

Supplier: PANGHOI ENTERPRISES Address: #58 Magsaysay Avenue, Baguio City E-mail Address: panghoienterprises@gmail.com Telephone No.: 442-4629 TIN: VAT-000-279-800-000	P.O No.:399 Date: 7/2/2021 Mode of Procurement: Shopping 121
---	--

Gentlemen: **Please furnish this office the following articles subject to the terms and conditions contained herein.**

Place of Delivery: **City General Services Office: Baguio City**

Delivery Term: 7 Calendar Days

Date of Delivery: Please input delivery date

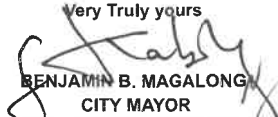
Payment Term: Please input payment term

Receipt of Purchase Order

Item	QTY	Unit	Description	Unit Cost	Amount
1	1	Lot	PAper etc c/o DRRM	106,620.00	106,620.00
	45	ream	Paper - Legal - Multicopy, 80gsm, size: 216mm x 330mm, 500 sheets per ream For Laurel Dorm - 545 c/o DRRM	210.00	9,450.00
	105	ream	Paper - Legal - Multicopy, 80gsm, size: 216mm x 330mm, 500 sheets per ream For BCCIU - Sto Nino Hospital - 545 c/o DRRM	210.00	22,050.00
	105	ream	Paper - Legal - Multicopy, 80gsm, size: 216mm x 330mm, 500 sheets per ream For BTCIU - Teacher's Camp - 545 c/o DRRM	210.00	22,050.00
	120	ream	Paper - A4 - Multicopy, 80gsm, size: 210mm x 297mm, 500 sheets per ream For BCCIU - Sto Nino Hospital Forms to be printed per patient: 1. Cover Sheet (Patient Information) 2. Consent Form 3. Initial Assessment 4. Patient History 5. Treatment Sheet 6. Monitoring Sheet 7. Doctor's Order 8. Nurses' Notes 9. PhilHealth Forms 9.a. CSF 9.b. CF2 9.c. PMRF 10. CBC Laboratory 11. Swab Result 12. Chest X-ray Result 13. House Rules 14. Vital Signs Sheet 15. Chart of patients Computation: 5 reams per week x 4 weeks = 20reams per month 20 reams x 6 months = 120 reams - 545 c/o DRRM	183.00	21,960.00
	120	ream	Paper - A4 - Multicopy, 80gsm, size: 210mm x 297mm, 500 sheets per ream For BTCIU - Teacher's Camp Forms to be printed per patient: 1. Cover Sheet (Patient Information) 2. Consent Form 3. Initial Assessment 4. Patient History 5. Treatment Sheet 6. Monitoring Sheet 7. Doctor's Order 8. Nurses' Notes 9. PhilHealth Forms 9.a. CSF 9.b. CF2 9.c. PMRF 10. CBC Laboratory 11. Swab Result 12. Chest X-ray Result 13. House Rules 14. Vital Signs Sheet 15. Chart of patients Computation: 5 reams per week x 4 weeks = 20reams per month 20 reams x 6 months = 120 reams - 545 c/o DRRM	183.00	21,960.00

In case of Failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one (1) percent for every day of delay shall be imposed

This is to certify that I have
TERMS and CONDITIONS as contained at the
back of this Purchase Order and I concur with all
 Conforme:

Very Truly yours

BENJAMIN B. MAGALONG
 CITY MAYOR

Signature over printed name of Supplier *Panghoi*