

PURCHASE ORDER
SENATE OF THE PHILIPPINES
 Entity Name

ATTN: Ms LALEN F.

Supplier : NEW CITIZEN'S DENTAL SUPPLY AND GENERAL MERCHANDISE	P.O. No. : PO-20-09-060
Address : 655, P. Paterno St. Quiapo, Manila, Philippines	Date : 03-September-2020
Tel No. : 733-9541 / 733 9541/733-2977	Mode of Procurement: Reference P.R. No. : PR-20-06-192
TIN : 103-794-486-000	AB No. : MDB

Attention : **LALEN B. FERNANDEZ**
 Please acknowledge receipt of faxed P.O. and re fax it to Telefax No. 552-6601 loc. 4262 or 552-6815. Thank You.

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

Place of Delivery : Rm. 401 Property and Procurement Service SENATE OF THE PHILIPPINES, GSIS BLDG. ROXAS BLVD. PASAY CITY	Delivery Term : 30 DAYS
Date of Delivery :	Payment Term : Government Terms
	Warranty :

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
1	BOX	Rubber dam (6x6)	1	600.00	600.00
2	PIECE	Rubber dam frame (plastic)	2	90.00	180.00
3	PIECE	Rubber dam clamp #8	3	80.00	240.00
4	PIECE	Rubber dam clamp holder	2	490.00	980.00
5	PIECE	Rubber dam puncher	1	850.00	850.00
6	SET	Glass ionomer cement type II	2	3,600.00	7,200.00

*Offer: ITEM NO.1-OFFER: Premier rubber dam sheet 6 x6 30pcs/bx
 ITEM NO.3-OFFER: AVAILABLE SIZES:201-211
 ITEM NO.5-OFFER:TRUMPF
 ITEM NO.6-OFFER:15grm fuji 2
 Nothing Follows*

200-2020-9-4559 10,050.00

9/110

RECEIVED
 PROCUREMENT SECTION, PPS
 Date: 9-16-20
 By: MZ Time: 3:46pm

RECEIVED
 SEP 16 2020
 1130

Page 1 of 1 **Grand Total: P10,050.00**

(Total amount in words) Ten Thousand Fifty Pesos Only

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]*
 Signature over Printed Name of Supplier **ATTY. ARNEL JOSE S. BAÑAS**
 Deputy Secretary
 Administrative and Financial Services

Fund Cluster: _____	ORS/BURS No. : _____
Funds Available: _____	Date of the ORS/BURS: _____
Signature over Printer Name of Chief Accountant: RHODORA R. ALINDADA <small>OIC, Legislative Accounting Service</small>	Amount : _____

Remarks: NOTE: PO TYPEWRITTEN BY PPS PER APPROVED ABSTRACT OF CANVASS NO. (20E-08-005) OPENED ON (09.01.20).
 THANK YOU LORD JESUS !!!
rgarrido
[Signature]