

**Republic of the Philippines**  
**Province of Davao del Norte**  
 Government Center, Mankilam, Tagum City  
**PURCHASE ORDER**

Supplier : <u>POWER-UP TIRES BATTERY &amp; AUTO SUPPLY CORP.</u>  PhilGEPS Registration No. : <u>2007-41327</u> Address : <u>QUIRANTE I ST., TAGUM CITY</u>  Tel / Fax #: <u>(084) 655-9602/ 0925-732-8631</u> Registration Certificate : <u>DTI</u>	P.O. No. : <u>2020114842</u>  Date : <u>November 26, 2020</u>  Mode of Procurement : <u>Shopping</u>  P.R. No. : <u>20106646</u>
--	--

Req. Off. : Provincial Legal Office

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

Place of Delivery <u>PGSO Warehouse</u> Date of Delivery: _____ Payment Term : <u>ON ACCOUNT</u>	Delivery Term: <u>10Calendar Day/s</u>
---	--

Item No.	Quantity/Unit	Description	Unit Cost	Amount
1	2 pcs	Lateral Bushing	5,000.00	10,000.00
2	2 pcs	Front Shock Absorber	5,800.00	11,600.00
3	1 pc	Steering Dumper	9,900.00	9,900.00
4	1 lot	Wheel Alignment	1,000.00	1,000.00
5	2 sides	Wheel Balancing	1,000.00	2,000.00
6	2 sides	Lateral Bushing Replaced	2,500.00	5,000.00
7	2 sides	Shock Absorber Replaced Front	2,500.00	5,000.00
8	1 lot	Steering Shock Dumper Replaced	1,500.00	1,500.00
9	1 pc	Fanbelt Tensioner	24,800.00	24,800.00

The award is based on Abstract No. 1120204656  
 dated November 24, 2020 under Quotation No. C20206126  
 opened on November 19, 2020

Repair & Maint. Expense for Office Vehicle - Nissan Patrol with Property No. 0130-0174-0001	GRAND TOTAL : P <span style="float:right">70,800.00</span>
---	--

Grand Total Amount in Words : **SEVENTY THOUSAND EIGHT HUNDRED and 0/100**

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.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme: \_\_\_\_\_

Very truly yours,

_____ Norma Solis-Maglente (Signature over printed name)  _____ (Date)	By the Authority of the Governor: <span style="float:right">EDWIN I. JUBAHIB</span> Governor   GALE GUADALUPE G. MORTILLERO, MSLRG, MHRM Assistant Provincial Administrator (Administration)
---	---

**NOTE :** This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.