




PURCHASE ORDER

Supplier : PRB AGRICULTURAL PRODUCTS Address : Purok 7, Sta. Cruz, New Corella, Davao del Norte PhilGEPS Registration No. : 2016021628531882463609 Tel./Fax No. : 09064812846 Registration Certificate : DTI	P.O. Number: 2023062058  O202306205858711AAD1 Date : Jun 08, 2023 P.R. No. : 2023010503 Procurement mode: Bidding
Req. Office : Provincial Veterinarian's Office	

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

Date of Delivery : _____ Payment Term : ON ACCOUNT	Delivery Term: End-user shall require the delivery of items in such quantity depending on actual needs
Place of Delivery : PO CHICKEN HOUSE (ON SITE DELIVERY)	

I.N.	Quantity/Unit	Item	Unit Cost	Amount
1	24,000.00 HEADS	2.5 MONTH OLD FREE RANGE CHICKEN 1. THE CHICKEN SHOULD BE 2.5 MONTH OLD ON THE DATE OF DELIVERY 2. THE CHICKEN WAS ALREADY DEWORMED & HAS COMPLETE VACCINATION (NCD, IB, MYCOPLASMA) UPON DELIVERY AND THE FARM VACCINATION RECORD MUST BE SUBMITTED TO THE REQUISITIONING OFFICE 3. THE SUPPLIER SHOULD SERVE ANIMAL RECORD FOR A PERIOD OF 2 MONTHS FROM THE DATE OF DELIVERY 4. DELIVERY OF THE CHICKEN WILL BE AT THE PO'S POULTRY HOUSES ALL OVER THE PROVINCE OF DAVAO DEL NORTE. DELIVERY SITES (PLS REFER REQUISITIONING OFFICE FOR EXACT LOCATION)	139.00	3,336,000.00

The award is based on Abstract No. **0420231279** created on **April 24, 2023** and resolved on **June 08, 2023** under Quotation No. **B20231304** opened on **April 20, 2023**

FOR DAVNOR KAAGAPAY FREE RANGE PROJECT 2023	
Grand Total Amount in Words : THREE MILLION THREE HUNDRED THIRTY-SIX THOUSAND AND XX / 100	GRAND TOTAL : ₱ 3,336,000.00

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,

 (Signature over printed name) **EDWIN I. JUBAHIB**
 _____ Governor
 (Date) **7-20-23**

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.

ALEJANDRO R. OMILA JR.