

PURCHASE ORDER

CENTRAL MINDANAO UNIVERSITY

Supplier: CARESYSTEM TECHNOLOGY SOLUTION CO. INC	PO No: SV-GF-142
Address: Cugman, Cagayan de Oro City	Date: 4/5/21
TIN: _____	Mode of Procurement: SMALL VALUE

Gentleman/Madam:
 Please furnish this office the following articles subject to the terms and conditions contained herein.

Place of Delivery: _____	Delivery Term: _____
Date of Delivery: _____	Payment Term: _____

ITEM NO	UNIT	DESCRIPTION	QUANTITY	UNIT COST	AMOUNT
1	unit	Air conditioner Split type high wall, 2.5 Hp Cooling Capacity, Non-inverter, Standard oversized tubing, EER 11 Minimum, with remote and timer, with 20 Amperes Aircon Breaker, R22/410a Ref. Rotary Compressor, with supply, delivery & installation/bracket, 1 year warranty and Services	4	77,338.00	309,352.00
2	unit	Air conditioner Split type high wall Standard, 2 Hp Cooling Capacity, Non-inverter, Standard tubing, EER 11 Minimum, with remote and timer, with 20 Amperes Aircon Breaker, R22/410a Ref. Rotary Compressor, with supply, delivery & installation/bracket, 1 year warranty and Services	1	69,738.00	69,738.00
3	unit	Air conditioner Split type high wall, 1.5 Hp Cooling Capacity, Non-inverter, Standard tubing, EER 11 Minimum, with remote and timer, with 15 Amperes Aircon Breaker, R22/410a Ref. Rotary Compressor, with supply, delivery & installation/bracket, 1 year warranty and Services	1	60,038.00	60,038.00
4	unit	Air conditioner Split type high wall mounted, 1 Hp Cooling Capacity, Non-inverter, Standard tubing, EER 11 Minimum, with remote and timer, with 10 Amperes igf available (or 15 Amperes) Aircon Breaker, R22/410a Ref. Rotary Compressor, with supply, delivery & installation/bracket, 1 year warranty and Service	1	56,738.00	56,738.00
Reference: JEREMY YVES P. CAPILI					495,866.00

Four Hundred Ninety Five Thousand Eight Hundred Sixty Six Pesos and No Cents

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.

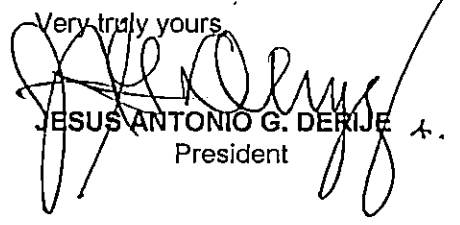
Conforme:

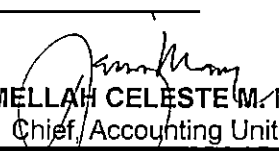
Lucalbo, Donna Mae

 Signature over Printed Name of Supplier

5-14-21

 Date

Very truly yours,

JESUS ANTONIO G. DERIJE +.
 President

Fund Cluster: _____	ORS/BURS No.: _____
Funds Available: _____	Date of the ORS/BURS: _____
 MARIA JAMELLAH CELESTE M. MAGALONA Chief, Accounting Unit	Amount: P <u>495,866.00</u>