

PURCHASE ORDER

CENTRAL MINDANAO UNIVERSITY

Supplier: CARESYSTEM TECHNOLOGY SOLUTION CO., INC. Address: Buhangin, Davao City TIN:	PO No: STF-22-SV-454 Date: 5/20/2022 Mode of Pr: SMALL VALUE
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Gentleman/Madam:
 Please furnish this office the following articles subject to the terms and conditions contained herein.

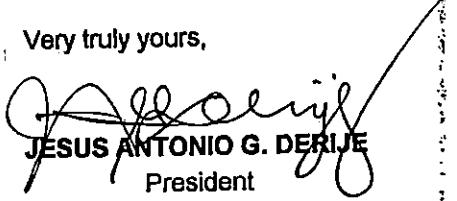
Place of Delivery: CMU-Supply Office, Musuan, Bukidnon Date of Delivery:	Delivery Term: Within Thirty (30) working days from the receipt by the supplies of Notice to Proceed (NTP) Payment Term:
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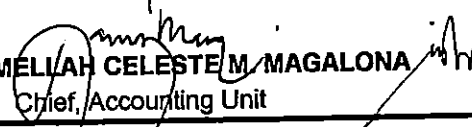
ITEM NO	UNIT	DESCRIPTION	QUANTITY	UNIT COST	AMOUNT
1		RAUL M. EBUÑA			
	unit	Wall Mounted Split - Type Aircon	1	35,295.00	35,295.00
		Specifications: Air Conditioner Rated Capacity (HP) 1.5, Power Consumption (W) 910, Type Air Conditioner Single Split System, Air Conditioner Rated capacity (BTUs) 12953, Air Conditioner Features: Inverter, Timer, Air Direction Control, Fast Cooling, Silent Mode, Sensor Control, Free Installation and Spare Parts	Koppel		
2		DANA MARIE E. DILOUIS			
	unit	6.0 HORSEPOWER - 5.0 TR Floor Standing Type Non-Inverter Unit Airconditioner, supply of materials and installation	1	144,295.00	144,295.00
			Koppel		
					179,590.00

Reference: **ORVEN G. RITARDO**
One Hundred Seventy Nine Thousand Five Hundred Ninety 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:


 Signature over Printed Name of Supplier
71-4/22
 Date

Very truly yours,

JESUS ANTONIO G. DERIJE
 President

Fund Cluster: _____ Funds Available: _____ <div style="text-align: center;">  MARIA JAMELIAH CELESTE M. MAGALONA Chief, Accounting Unit </div>	ORS/BURS No.: _____ Date of the ORS/BURS: _____ Amount: ₱ <u>179,590.00</u>
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