

**PURCHASE ORDER
MUNICIPALITY OF CAPAS**

LGU	
Supplier : <u>A-DINE TRADING</u>	P.O. No. : <u>22-09-179</u>
	Date : <u>09-08-22</u>
Address : <u>San Fernando City, Pampanga</u>	Mode of Procurement <u>Negotiated procurement- Emergency</u>
	PR No./s : <u>100-22-09-174</u>

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

Place of Delivery : <u>Mun. of Capas / RHM</u>	Delivery Term : <u>1 Wk.</u>
Date of Delivery :	Payment Term:

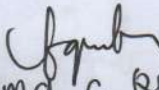
Unit	Quantity	Description	Unit Cost	Amount
box of 25's	60	Covid-19 antigen rapid test device nasopharyngeal (FDA and RITM validated)	8,700.00	522,000.00

Total Amount in words. Five hundred twenty-two thousand pesos. **522,000.00**

In case of failure to make the full delivery within the time specified above a penalty of one-tenth (1/10) or one percent every day of delay shall be imposed.

Very truly yours

HON. ROSELLER B. RODRIGUEZ
Municipal Mayor

Conforme 
Ma. Fatima C. Bujambao
A-DINE TRADING

(Signature over Printed Name)

(In case negotiated Purchase pursuant to section 36B(a) of RA /160, this portion must be accomplished)

Approved per Sanggunian Resolution No.:
Certified Correct :

Date : _____

Secretary to the Sanggunian