

Republic of the Philippines

Province of Davao del Norte Government Center, Mankilam, Tagum City

PURCHASE ORDER

Supplier: GOLDEN JV GASOLINE STATION

Address: PRK. 8 MAMBAGO-B IGACOS 8119 ISLAND GARDEN CITY OF

SAMAL DAVAO DEL NORTE

PhilGEPS Registration No.: 201905421651878046290

Tel./Mobile/Fax No.: 09184847453

Place of Delivery: PGSO Warehouse

Registration Certificate: DTI

Req. Office: PEEDO - DDN Hospital (IGCS Zone) P.O. Number: 2024051036



O2024051036973664000

Date: May 02, 2024 P.R. No.: 2024042477

Procurement mode: Negotiated Procurement -

Direct Retail Purchase

(POL/AT)

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

Date of Delivery:

Payment Term : <u>ON ACCOUNT</u> Delivery Term: Pick up

Partial delivery NOT ALLOWED

| | | | <u></u> | | |
|------|---------------|-----------------------|------------|------------|--|
| I.N. | Quantity/Unit | ltem | Unit Cost | Amount | |
| 1 | 1.00 Lot | ATF | 276.41 | 276.41 | |
| 2 | 1.00 Lot | ENGINE OIL | 618.00 | 618.00 | |
| 3 | 1.00 Lot | GASOLINE SILVER / XCS | 3,960,00 | 3,960.00 | |
| 4 | 1.00 Lot | OIL 40 | 17,074.00 | 17,074.00 | |
| 5 | 1.00 Lot | DIESEL | 175,780.00 | 175,780.00 | |

Remarks: Consumption from April 16 - 30 to July 30 2024 payment be made monthly basis on actual pump price

TERMS AND CONDITIONS

- 1. Bid Prices for procurement using the Retail Pump Price or the price of petroleum fuel per liter, such as, gasoline, diesel oil and kerosene, as established by retailers, dealers or gas stations for the day. Cost for E-VAT and other governmental costs which fall equally on all prospective suppliers are presumed to be included in the computation of the bid price.
- 2. For staggered deliveries, the procuring entity shall make, after every delivery, an accounting of the amount actually payable based on the date of the delivery receipt to determine the allowable unit/volume that may still be ordered from the remaining amount allotted for each POL product. The procuring entity shall be allowed to make adjustments in the units/volume to be delivered per type of product to conform to the remaining amount in the total contract price.
- 3. The supplier shall be responsible to dispense fuel to PEEDO DDN Hospital (IGCS Zone) vehicles only and ensure that issued fuel will not exceed PO allocation.
- 4. Fuel, Oil, Lubricants and Other Services shall be available to the PEEDO DDN Hospital (IGCS Zone) upon the issuance of the approved Purchase Order (PO). All purchases must be accompanied by properly accomplished and duly signed PO.

| For the used of Peedo- DDNH , IGCS Zone | | | | |
|---|---|--|--|--|
| | | | | |
| In case of failure to make the full delivery within the time for every day of delay shall be imposed. | e specified above, a penalty of one-tenth (1/10) of one percent | | | |
| | | | | |

Conforme:

MARGELIN POMOONE

(Signature over printed name)

May 2024 (Date)

Very truly yours, By the Authority of the Governor:

GALE GUADALUPE 6'. MORTILLERO, MSLRG, MHRM Assistant Provincial Administrator (Administration) DE CARLO L. UY **Acting Governor**

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



NOTE:

Republic of the Philippines

Province of Davao del Norte Government Center, Mankilam, Tagum City

| | PURCHA | ASE ORDE | R | | |
|--|--|--|--|--------------------------|--|
| Supplier : GOLDEN JV GA | SOLINE STATION | - | P.O. Number: 2 | 02405103 | |
| Address :PRK. 8 MAMBA SAMAL DAVAO | GO-B IGACOS 8119 ISLAND GA DEL NORTE | RDEN CITY OF | O2024 | 0510369 7 | /3664000 |
| PhilGEPS Registration No. Tel./Mobile/Fax No.: 091 Registration Certificate: | ************************************** | | Date: <u>May 02,</u> P.R. No.: <u>2024</u> | <u>2024</u> 042477 | ed Procurement - |
| Req. Office: PEEDO - D | DN Hospital (IGCS Zone) | | | | tail Purchase |
| Gentlemen: Please furnish | this office the following articles su | bject to terms and o | conditons contain | | |
| Date of Delivery : | | m : ON ACCOUNT | Delivery Term: Pic | | ry NOT ALLOWED |
| Place of Delivery : PGSO | warenouse | | | | - TOTALLONED |
| I.N. Quantity/Unit | ltem | | Unit Cost | | Amount |
| roducts/services are given lospital (IGCS Zone); ma | ure that a transaction slip/receip ; that the transaction slips accura intain a comprehensive register unt with copies of transaction slip/ | itely reflects any an to record all withdr | d all purchases of awals made on | charged to a per veh | the PEEDO - DDI icle basis; issue a |
| | by the PEEDO - DDN Hospital (nents covering actual purchases. | IGCS Zone) within | 30 calendar day/ | s from rec | eipt of the monthl |
| 7. The supplier shall provide | e immediately the following docum | nentary requirement | s for the processi | ng of payn | nent, viz: |
| a) Mayor's permit b) BIR Certificate of Regi- c) Omnibus Sworn Stater d) PhilGEPS Registration | | atinum Membership |) | | |
| 3. The supplier shall be loca | ated within 6 kilometers radius fro | om the requisitioning | g office. | | |
| 9. No advance withdrawal is | s allowed prior to the approval of t | he Purchase Order. | | | • |
| 0. Additional fund allocatio | n due to supplemental budget, au | gmentation shall fol | low the usual pro | cedures of | procurement. |
| 11. The supplier shall providence of the supplier shall providence of the supplier of the supp | de fuel, oil, lubricants and other pr ding free of charge basic services | oducts/services req like windshield clea | uirement of the P ning, oil/water le | EEDO - D /el checkin | DN Hospital (IGCs g, and tire pressure |
| 12. The PEEDO - DDN Hos hich shall arise in terms of | pital (IGCS Zone) reserves the recustomer service or in accordance | ight to withdraw or o | cancel the Purcha the 2016 revised | ise Order, I IRR of R | should there issue: A No. 9184, withou |
| For the used of Peedo- DDN | H , IGCS Zone | | | | |
| A | | | | | |
| In case of failure to for every day of delay shall | make the full delivery within the t be imposed. | time specified above | e, a penalty of on | e-tenth (1/ | 10) of one percent |
| ` - | iture over printed name) ay ૨, ૨૦૧૫ | Very trul By the Authority of the GALE GUADALUPE G. MORTILLEI Assistant Provincial Administration | RO, MSLRG, MHRM | DE CARLO | |
| | ortant paper and will cause gread by this form to be attached to the | | lost. Claim for p | payment fr | om the Provincial |



thereby incurring any liability to the affected supplier.

Republic of the Philippines

Province of Davao del Norte Government Center, Mankilam, Tagum City

PURCHASE ORDER

| Supplier : GOLDEN JV GASOLINE STATION Address : PRK. 8 MAMBAGO-B IGACOS 8119 ISLAND GARDEN CITY OF SAMAL DAVAO DEL NORTE | | P.O. Number: 2024051036 O2024051036973664000 | |
|---|--|--|---------------------|
| PhilGEPS Registration Tel./Mobile/Fax No. : Registration Certificate | | Date: May 02, 2024 P.R. No.: 2024042477 Procurement mode: Negotiated Procurement | |
| Req. Office: PEEDO | - DDN Hospital (IGCS Zone) | | t Retail Purchase |
| Gentlemen: Please fu | nish this office the following articles subject to terms and | conditons contained he | rein: |
| Date of Delivery : Place of Delivery : _P | Payment Term : ON ACCOUNT GSO Warehouse | Delivery Territ. Fick up | elivery NOT ALLOWED |
| I.N. Quantity/Unit | Item | Unit Cost | Amount |

Amount

The award is based on Memorandum Circular No. 04 series of 2022 and PR No. 2024042477 under Quotation No. L20241936 opened on May 02, 2024

| or the used of Peedo- DDNH , IGCS Zone | | | |
|---|--|-----------------------------|-------------|
| Grand Total Amount in Words : ONE HUNDRED NINETY SEVEN HUNDRED EIGHT AN | 7-SEVEN THOUSAND GRAN ID 41 / 100 | D TOTAL : | 197,708.41 |
| In case of failure to make the full delivery within or every day of delay shall be imposed. | the time specified above, a pen | alty of one-tenth (1/10) of | one percent |
| Conforme: INARCE PONDONO (Signature over printed name) | By the Authorn the the Gove | | v |
| May 2, 2024 | GALE GUADALUPE G. MORTILLERO, MSLRG Assistant Provincial Administrator (Adminis | i, MHRM Acting Governo | |

Treasurer supported by this form to be attached to the voucher.

NOTE:

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