




PURCHASE ORDER

Supplier : 3RD ERA AGRISOLUTIONS	P.O. Number: 2024072205
Address : #1209 Osmena Ext., Maguipo West, Tagum City	 O2024072205D4ACFF38C
PhilGEPS Registration No. : 201711128000489148782	Date : Jul 26, 2024
Tel./Mobile/Fax No. : 09175962686	P.R. No. : 2024042657
Registration Certificate : DTI	Procurement mode: Shopping B (Regular Purchase)
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: 15 Calendar Days
Place of Delivery : PGSO Warehouse		Partial delivery NOT ALLOWED

I.N.	Quantity/Unit	Item	Unit Cost	Amount
		designed for precisions injections - suitable for injecting most liquids, oily, viscous or heavy iron solutions as well as variety or suspensions - Superior long lasting quality - autoclavable - Easily disassembled and maintained heavy duty and high quality product SOCOREX		

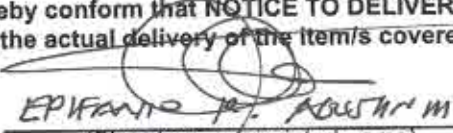
Remarks :
PLEASE SEE QUOTATIONS ATTACHED

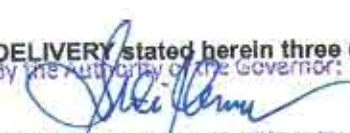
The award is based on Abstract No. **0620241827** created on **June 14, 2024** under Quotation No. **C20242310** opened on **May 30, 2024**

TO BE USE IN LIVESTOCK AND POULTRY RESTOCKING PROJECT IN MULTIPLIER FARMS	
Grand Total Amount in Words : ONE HUNDRED THIRTY-SEVEN THOUSAND AND XX / 100	GRAND TOTAL : ₱ 137,000.00

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 : 
(Signature over printed name)
11/13/2024
(Date)

Very truly yours,

GAIL CHAQUILA G. MORTUERO, MSW, MHRM
Assistant Provincial Administrator (Administration)
EDWIN I. JUBAHIB
Governor

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.

RHEA GIN M. RAMOS