

**PURCHASE ORDER**  
**NATIONAL COMMISSION ON MUSLIM FILIPINOS**  
**Entity Name**

Supplier : <u>AIRCONDITIONING SUPPLY AND SERVICES COOLING TWIN</u>	P.O. No. : _____
Address : <u>Bgry. Poblacion Central, Rizal, Nueva Ecija</u>	Date : _____
TIN : <u>767-280-355-000</u>	Mode of Procurement : <u>SVP</u>



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


Place of Delivery : <u>NCMF-Central Office</u>	Delivery Term : _____
Date of Delivery : _____	Payment Term : _____

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
	Units	<b>SUPPLY, DELIVERY AND INSTALLATION OF                      AIR CONDITIONING UNIT</b>  <b>2HP SPLIT TYPE, INVERTER</b> <i>Features:</i> Eco-Friendly Refrigerant Sleep Mode 0.5W Standby Washable Filter Hydrollic Aluminum Fin Anti-Fungus Function Auto-restart Quick Cooling	4	51,000.00	<b>₱ 204,000.00</b>

**(Total Amount in Words) TWO HUNDRED FOUR THOUSAND PESOS ONLY**

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 on the undelivered item/s.

Conforme:  <div style="text-align: center;">   <b>JOWELL E. ALCONTIN</b>                      Signature over Printed Name of Supplier   <u>March 20, 2023</u>                      Date                 </div>	Very truly yours,  <div style="text-align: center;">   <b>GULING A. MAMONDIONG</b>                      Signature over Printed Name of Authorized Official                       Secretary                      Designation                 </div>
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Fund Cluster : _____	ORS/BURS No. : _____
Funds Available : _____	Date of the ORS/BURS: _____
 <b>NORAIDA M. PANTAO</b> Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit	Amount : _____