

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

General Services Division

Supplier : **SWIFTWAY CONSUMER GOODS TRADING**  
 Address : Blk 13 Lot 19 Segovia St., Monte Brisa 2 Manggahan Rodriguez, Rizal  
 TIN : 610-558-245-000

P.O. No. :  
**PO No.: 2024-08-0041**  
 Date :  
 Mode of Procurement :

Gentlemen:

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

Place of Delivery : NCMF-Central Office

Date of Delivery : \_\_\_\_\_

Delivery Term : \_\_\_\_\_

Payment Term : \_\_\_\_\_

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
		<b>SUPPLY, DELIVERY AND INSTALLATION OF AIRCONDITIONING UNIT OF NCMF-CENTRALOFFICE</b>			
	unit	2.5HP Wall Mounted Split Type Aircon- Inverter	7	P 37,000.00	<b>P 259,000.00</b>
	unit	2.5HP Window Type Aircon - Inverter	3	P 33,000.00	<b>P 99,000.00</b>
	unit	Installation with Dismantling Warranty: 5 years compressor 1 year labor and parts	10	P 6,500.00	<b>P 65,000.00</b>

(Total Amount in Words) **FOUR HUNDRED TWENTY-THREE THOUSAND PESOS ONLY****P 423,000.00**

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 on the undelivered item/s.

Conforme:

**DON JUAN R. DELA SERNA**

Signature over Printed Name of Supplier

**June 28, 2024**

Date

Very truly yours,

**SABUDDIN N. ABDURAHIM**

Signature over Printed Name of Authorized Official

**Secretary**

Designation

Fund Cluster : \_\_\_\_\_

Funds Available : \_\_\_\_\_

**HASMIN D. MANONGGIRING**Signature over Printed Name of Chief Accountant/Head of Accounting  
Division/Unit

ORS/BURS No. : \_\_\_\_\_

Date of the ORS/BURS: \_\_\_\_\_

Amount : \_\_\_\_\_