Name of Procuring Entity:LGU-Province of Davao de Oro
Standard Form No. SF-GOOD-58
Revised:May 24,2004
Std. Form Title:Purchase Order

PURCHASE ORDER

FEB 28 2025

Province of Davao de Oro
Agency/Procuring Entity

Supplier: DAVAO TCM HARDWARE	PO Number: 25020075
Address: Panacan, Davao City	Date: 02/14/25
E-mail Address:	Mode of Procurement PB
Tel. No.:	
TIN:	PR Number: 25-C0042

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

Place of Delivery: PGSO-Warehouse — Delivery Term:
Date of Delivery: As per letter request — Payment Term:

No.	Stock No.	Unit of Issue	Quantity	Description	Unit Cost	Amount
1	28741N	bag/s	1120.00	**Portland Cement (Type 1)Terms and Conditions:** **Supplier must submit a Quality Test Result (Please coordinate with Quality Control Engineer for the Conduct of Quality Test through Accredited Testing Laboratory)** **Repair and Maintenance of Provincial Roads and Bridges (District I)** **Monkayo - Awao, Monkayo, Davao de Oro** **Banlag - Casoon Road, Monkayo, Davao de Oro** **Alegria - Panag - Camanlangan, New Bataan, Davao de Oro** **JCT Highway - Kanidkid - Mayaon - Baluarte, Davao de Oro** **THE AWARD IS BASED ON ABSTRACT NO. 2502008 UNDER BID NO.B-25-0010 OPENED ON February 04, 2025**	295.00	330,400.00

COMMISSION ON AUDIT DAVAO DE ORO
TEAM 1
RECEIVED
DATE: 3/6/25
TIME: 4:21
BY:

Total Amount in Words:
Three Hundred Thirty Thousand Four Hundred Pesos Only — 330,400.00

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

Conform JERNY GABALLO
Signature over printed name of
03-04-25
Date

Very truly

DOROTHY M. GONZAGA
Governor
Authorized Official

By Authority of the Governor:
DOROTHY M. GONZAGA
Provincial Assistant

GENERAL
OBR No.: 0145-07-25-105
Responsibility Center:
Amount: 330,400.00

(In case of Negotiated Purchase pursuant to section 369(a) of RA 7180, this portion must be
Aprroved per Sanggunian Resolution _____
Certified _____ Date _____