

PURCHASE ORDER CITY GOVERNMENT OF PASIG

Agency Name

Supplier: MNJ TRADING P.O. N							No.: 24-03-1116			
Address	: <u>Unit 203</u>	Fiori Bldg., Ca	ori Oasis, Dr. Sixto Anton Avenue, Mayb	ybunga Pasig City		Date:	1 9 MAR 2024			
						Mode of P	rocurement: SMALL V	ALUE PROGUREMENT		
Gentlemen		urnish this of	fice the following articles subject	t to the terms	s and	conditions	contained herein:			
The state of the s				t to the term.	3 and	Conditions	Contained Hereitt.			
Place of I Date of I	_	Central Sup					a : 45 Calendar Days Upon the Receipt of Notice a : within 45 days upon completion of delivery			
ITEM							UNIT			
NO.	UNIT	QTY	DESCRIP	TION	COOM-		COST	AMOUNT		
1	unit	11	Printer, EPSON ECOTANK LSONE INK TANK VITH ADF -Digital color copier which is scanning, printing and fax w feeder -Printing technology; Inkjet of -Printing speed of at least up-Paper capacity of at least up-Paper capacity of at least Susheets (Legal) -Printer resolution of at least Capable of printing to various Capable of printing to various Capable of borderless printing Uses Dye Inks (Black, Magas Supports USB, LAN, Wiffiar network management protocomust be supported with app manufacturer to optimized disputation of the lagonal Mac OS and Mac OS	capable of control of the automatic or equivalent programmed to 33.0 ppm to 5760 x 144 us paper size ing up to 4R enta, Cyan and Wiff direct collections/utillevice functions	color c docu	16,250.00	178,750.00			
			-With at least 1 year warranty on parts and services							
2	bottles	104	Ink (Black), EPSON -Compatible with Procured Printer				330.00	34,320.00		
3	bottles	51	Ink (Cyan), EPSON -Compatible with Procured Printer				330.00	16,830.00		
4	bottles	51	Ink (Yellow), EPSON -Compatible with Procured Printer				330.00	16,830.00		
Control N	o. 5409					nerver hierar harrennahmar er avenuere	SUBTOTAL:	Php 246,730.00		
	ount in W	ords Two H	undred Forty-six Thousand Seven F	Hundred Thir	tu Pes	os Only.	OODIOINE.	1119 2-70,100.00		
In for every	case of the f day of delay	ailure to make	the full delivery within the time specified as provided for by the, 2016 IRR	fied above, a p t of RA 9184.	enalty		(1/10) of one (1) perce	nt		
Confo	rme:		\bigcap_{α}							
		10, [Ledin Villamers			VIC	TOR MA REGIS I	N. SOTTO		
		FN' ROMIN	IA C. FERRER				(Authorized Off	icial)		
	(Signature over	printed name of Supplier)				City Mayor			
		-	Date.			ϕ				
Docuietti	onio - OCC	a/Da!	1	T- 1 4	1	b)				
requisition	oning Offic	e/ Dept.:	4	Funds Ava	mable	W.	Amount:	# 286 16200		
	JO	SEPH R. PAN	ALIGAN,MD,MHA			DENCO				
		(Authorize	ed Official)	Ch	ief Acc	countant	OBR No.:	TRNST FUND		
		-		AND THE PROPERTY OF THE PARTY O				Page - 1		



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	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.				and the second s				
Supplier: MNJ TRADING P.O. N						.O. No. :	D. No. : 24-03-1116		
Address :	Unit 203	Fiori Bldg., Ca	ori Oasis, Dr. Sixto Anton Avenue, Mayb				Procurement: SMALL VALUE PROCUREMENT		
Gentlemen:	Please fu	rnish this of	fice the following articles subject	to the terms	and co	nditions	contained herein:		
Place of De Date of De		Central Sup	ply Office				t : 45 Calendar Days Upon the Receipt of Notice		
ITEM NO.	UNIT	QTY	DESCRIP	<u> </u>			UNIT COST	AMOUNT	
5.	bottles	51	Ink (Magenta), EPSON -Compatible with Procured Printer			330.00	16,830.00		
							Sub Total :	263,560.00	
8	ream	100	LOT 3. Copy Paper, A4, HARD COPY -80. gsm, 500sheets/ream.	(226.00	22,600.00	
			* Purchase Order shall cove Request for Quotation, Term Specifications and Bid Bulle	ns of Reference					
			**************************************	NUS ********	*****	****	Sub Total :	22,600.00	
For the	allee of (City Health [Department - Philhealth						
roi tile	036 01	ony rieanir L	Department - Fillinealth						
Control No.	5409						GRAND TOTAL :	Php 286,160.00	
Total Amor			undred Eighty-six Thousand One F						
for every d	ay of delay	shall be impo	e the full delivery within the time specif osed as provided for by the, 2016 IRR	led above, a pe l of RA 9184.	naity of	one tenth	(1/10) of one (1) percei	าโ	
				Ver	y truly	yours,			
Conform	ne:	.	Colin Villanua			VIC	TOR MA REGIS	, sotto	
		FOI'GE FOMIN	IA C. FERRER		***************************************		(Authorized Offi City Mayor	icial)	
	(printed name of Supplier) 7 2 1 Date			h			
Requisition	ning Office	e/Dept.:	1-	Funds Avai	lable ;			1 00(1 M)	
	JO	SEPH R. PAN	ALIGAN,MD,MHA	1	A. Cu		Amount : _	TRUST FIND	
		(Authoriz	ed Official)		-			Page - 2	