

Republic of the Philippines
OFFICE OF THE SOLICITOR GENERAL
134 Amorsolo St., Legaspi Village
Makati City

PURCHASE ORDER

Supplier: HONDA CARS SHAW Address: Shaw Boulevard corner Pilar Street, Brgy. Addition Hills Mandaluyong City, 1552 TIN: 0000-220-239-00002 Account No.: 3301-0176-33 Bank: BPI Telephone: 8424-1272 Email Address: banaycc@hondamakati.com.ph	P.O. # 021-12-239 Date: December 31, 2021 Mode of Procurement: Small Value Procurement 53.9
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Gentlemen:
Please furnish this Office the following articles subject to the terms and conditions contained herein:

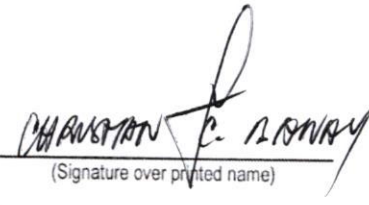
Place of Delivery: OFFICE OF THE SOLICITOR GENERAL	Delivery Term: w/n 30 days upon receipt of P.O.
Date of Delivery:	Payment Term: Cash

Stock No.	Unit	Description	Qty.	Unit Cost	Amount
		Preventive Maintenance Service: Perform 60,000 KM Check-up for OSG Service Vehicle Model Honda Mobilio 1.5 RS NAVI CVT with Conduction Sticker No. DS3319 Assigned to ASG Hermes L. Ocampo			
		Labor:			
	hour	Quality Inspection	0.500	Php -	Php 0.00
	hour	Complete Washing (Medium)	2.320	650.00	1,508.00
	hour	PM 60T KM	4.250	600.00	2,550.00
	hour	PM Misc Charges	1	250.00	250.00
	hour	PM Material Charges	1	922.32	922.32
		Labor Cost:			Php 5,230.32
		Parts:			
	piece	Cartridge, Oil Filter	1	386.76	Php 386.76
	piece	Washer, Drain Plug, 14mm	1	26.50	26.50
	piece	Element Assy., Air C	1	799.11	799.11
	piece	Honda CAF PM2.5+ SMA	1	950.00	950.00
	piece	Belt ACG	1	1,425.89	1,425.89
	piece	SN 0W20 4x4L	1	2,558.51	2,558.51
	piece	Brake Fluid DOT3 0.5L	1	365.94	365.94
	piece	Brake & Parts Cleaner	1	209.46	209.46
	piece	AC Anti-bacterial (AI)	1	892.86	892.86
		Parts Cost:			Php 7,615.03
		Labor:			Php 5,230.32
		Parts:			7,615.03
		Subtotal			Php 12,845.35
		Add 12% VAT:			1,541.44

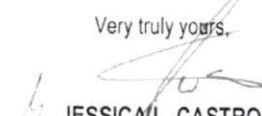
Total Amount in Words: **Fourteen Thousand Three Hundred Eighty Six Pesos & 79/100 Only** **Php 14,386.79**


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.

Very truly yours,

Conforme: 
(Signature over printed name)

_____ (Date)


JESSICA L. CASTRO
 CAO, Administrative Division


EDITHA R. BUENDIA
 Director IV, HRMAS

Funds Available: _____ ALOBS: _____ Amount: _____	<p style="text-align: center;">ARIEL J. UBIÑA Chief Accountant</p>
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