



**NATIONAL HOME MORTGAGE  
FINANCE CORPORATION**

TIN: 000-531-803-000



**NHMFC**



03030421160000143

RIS NO.: **21-02-040**

Requisitioning Group/Dept. Office of the President	<b>PURCHASE ORDER</b>	P.O. No. 00002070	Date 3/4/2021
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**TO:**  
ANSON EMPORIUM CORP.  
  
GLORIETTA BRANCH MAKATI CITY  
  
TIN:

GENTLEMEN/LADIES:  
Please supply us within \_\_\_\_\_  
days after receipt of this purchase order the item(s) listed  
below.  
Terms of Payment: Within \_\_\_\_\_ days  
after complete delivery and submission of all requirements.

Qty.	Unit of measure	Complete Item Name and Specification <small>(i.e. description, size/dimension/volume, model, use of item, color, capacity, etc.) Brand Name &amp; Country of origin or manufacture (if no brand, state none)</small>	Unit Price	Total
1	UNIT	REFRIGERATOR (9.4CU. FT. Inverter, Two (2) door mount, Panasonic, Model: NR-BQ261VB) Place delivery: 7th Floor NHMFC Office, Dept. of Human Settlement and Urban Development (DHSUD) Kalayaan Avenue, Mayaman, Diliman, Quezon City	19,920.00	19,920.00
<b>Grand Total</b>				<b>19,920.00</b>
		Funds Available:		
		3/4/21 Signature over printed Name / Date		

**Recommending Approval**  
  
LEONOR GRACIA A. AQUINO  
CEO II, OP

**APPROVED**  
  
DR. FELIXBERTO U. BUSTOS, JR.  
PRESIDENT

Supplier contact details:  
Tel no.:  
Fax no.:  
Cellphone no.:  
E-mail Address:  
  
Taxes paid by NHMFC (i.e VAT, etc., if taxes are paid by  
supplier, do not indicate):  
  
Check if: Exclusive Distributor or [ ]  
Manufacturer [ ]  
Check if: DTI Registered, only [ ]  
SEC Registered, only [ ]  
Both SEC & DTI Registered [ ]

We declare it to be known and accepted by us that our failure to effect delivery of the  
item(s) covered by this order within the period specified herein shall give the Corporation  
the right to cancel this order or make an open market purchase of the undelivered item(s)  
for which we agree to reimburse the Corporation for all payments made by it in excess of  
the unit price quoted herein for the said undelivered item(s).  
We further declare that failure to deliver item(s) within the specified delivery period may  
subject us to payment of liquidated damage in an amount equivalent to 1/10 of 1% of the  
total value of the undelivered item(s) for every day of non-delivery.  
Will submit the following requirement upon delivery to facilitate payment of the  
corresponding bill:  
1. Original Purchase Order and two (2) copies of the Supplier's Invoice(s) bills  
2. Xerox copy of Certificate of Registration (BIR Form 2303) & Taxpayer  
Clearance Certificate  
3. Xerox copy of Business & Mayor's Permit  
Mode of Procurement:  
 \*Shopping [ ] \*Small Value [ ] Public Bidding  
(\* Submit Item #1 only)

(Please see additional requirement(s))  
at the back hereof

Signature:   
Printed Name: **Supplier/Contractor-Date** **4/21 21**