

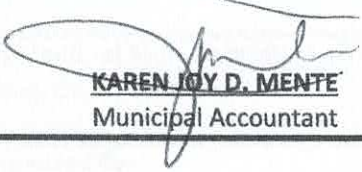

PURCHASE REQUEST
AYUNGON
LGU

Department: _____ PR No.: _____ Date: _____
 Section: _____ SAI No.: _____ Date: _____
 ALOBS No.: _____ Date: _____

Quantity	Unit of Issued	Item Description	Stock No.	Estimated Unit Cost	Estimated Cost
1	unit	Aircon Floor Mounted 3 tonners w/ installation XXXXXXXXXXXXXX			70,000.00

Sub Total

Purpose: For Accounting Office use at Municipality of Ayungon Neg. Or.

Requested By:	Approved By:
 KAREN JOY D. MENTE Municipal Accountant	 EMARIE F. AGUSTINO Municipal Mayor
Signature:	
Printed Name:	