



REV. 8/99

PO No: 0076LDRHPO2200253

## **LOCAL PURCHASE ORDER**

Date:

13 Jun 2022

TO:

SAYONA TRADERS

Payee's TIN:

102-304-304

Payee's Address BOX 53 LINDI

Region:

LINDI

FROM:

SOKOINE REGIONAL REFERRAL HOSPITAL

Payer's Code:

0076LDRH

Payer's Address: LINDI

Region:

LINDI

Warrant Holder:

Please Supply Goods/ Services Detailed below:

NO	ITEM DESCRIPTION	иом	QTY	UNIT PRICE	VAT	TOTAL AMOUNT
1.	CONCRET NAILS	Вох	1	100,000.00	0.00	**********100,000.00
2.	NAILS 4 "KG 50	Bag	2	200,000.00	0.00	**********400,000.00
;3.	NAILS 5" KG 50	Bag	1	200,000.00	0.00	***********200,000.00

**Total Amount Payable:** 

\*\*\*\*\*\*\*\*\*\*700,000.00

## **TERMS AND CONDITION:**

- 1. Your invoices should be submitted together with the original of the LPO.
- 2. The Purchase Order Number must be quoted on all communications relevant to this order.
- 3. 2 days with deduction of 2% and or 5% Withholding Tax where appropriate.

Purchase Order Request No:

Request Prepared by:

Goods/Service to be delivered to:

Authorized By:

Expected Date for delivery: 15 Jun 2022

Prepared By:

Bertha

ALFRED

Approved By:

Rehema Massawe

mmelle

Twaha

Chitanda

**Purchase Officer** 

**Accounting Officer** 

Official Seal

**Supplier Representative** 

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