THE UNITED REPUBLIC OF TANZANIA



REV. 8/99

PO No: 0076LDRHPO2200159

LOCAL PURCHASE ORDER

Total Amount Payable: ************************************								
Payer's TIN: 129-513-934 Payer's Address P.O. BOX 1070 LINDI Region: LINDI Warrant Holder: Please Supply Goods/ Services Detailed below: NO ITEM DESCRIPTION UOM QTY UNIT PRICE VAT TOTAL AMOUNT 11. MCHANGA (Cobic Meter 160): 30,000,000; 4,800,000,000 TOTAL AMOUNT Payable: 4,800,000,000 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. 3 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: Prepared By: Bertha ALFRED Approved By: Rehema Twaha Massawe Purchase Officer Approved By: Rehema Twaha Massawe HPMU	Date:		24 Apr 2022					
Payee's TiN: 129-513-934 Payee's Address P.O. BOX 1070 LINDI Region: LINDI Warrant Holder: Please Supply Goods/ Services Detailed below: NO ITEM DESCRIPTION UOM QTY UNIT PRICE VAT TOTAL AMOUNT 1. MCHANGA CONDITION: Total Amount Payable: *4,800,000.00 TOTAL Amount Payable: *4,800,000.00 TOTAL Amount Payable: *4,800,000.00 TOTAL Amount Payable: *4,800,000.00 ERMS 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. 3 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: Approved By: Rehema Twaha Chitanda Massawe Purchase Officer HPMU	TO:		SHAIBU DADI MKANA			FROM:	SOKOINE REGIONAL RE	FERRAL HOSPITAL
Payee's Address P.O. BOX 1070 LINDI Region: LINDI Warrant Holder: Please Supply Goods/ Services Detailed below: NO ITEM DESCRIPTION UOM QTY UNIT PRICE VAT TOTAL AMOUNT 1. MCHANGA Cubic Meter 160 30,000,00 0,00 4,800,000,000 Total Amount Payable: **4,800,000,00 Total Amount Payable: **4,800,000,00 Total Amount Payable: **4,800,000,00 ERRIS 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. 3 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: Prepared By: Bertha ALFRED Approved By: Rehema Twaha Massawe	Payee'	's TIN:	129-513-934			Payer's Code:		
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Total Amount Payable: ************************************	1.	MCHANGA	· · · · · · · · · · · · · · · · · · ·	Cubic Meter		,,		
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Authorized By: Prepared By: Bertha Chitanda Chitanda Purchase Officer Expected Date for delivery: 27 Apr 2022 Approved By: Rehema Twaha Massawe HPMU	2. The Pu 3. 3 days Purchase	urchase Or s with dedu	der Number must be quoted action of 2% and or 5% Withhampuest No:	on all commun	ications rele	evant to this order.		
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Accounting Officer

Official Seal

Supplier Representative