



REV. 8/99

PO No: 0070ARRHPO2200292

## LOCAL PURCHASE ORDER

Date:	03 Apr 2022				
то:	TIA LIMITED				
Payee's TIN:	101-607-526				
Payee's Address	PO.BOX 779 ARUSHA				
Region:					

MOUNT MERU REGIONAL REFERRAL HOSPITAL FROM: 0070ARRH Payer's Code: Payer's Address: ARUSHA

Warrant Holder:

Please Supply Goods/ Services Detailed below:

NO	ITEM DESCRIPTION	иом	QTY	UNIT PRICE	The state of the s	TOTAL AMOUNT
1.	LUMPSUM	Each	1	2,186,000.00	0.00	**********2,186,000.00

Region:

Total Amount Payable:

**ARUSHA** 

\*\*\*\*\*\*\*\*\*2,186,000.00

## TERMS AND CONDITION:

2. The Purchase Order Number must be quoted on all communications relevant to this order

3. 37 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: 10 May 2022

Prepared By:

Joyceline\

Indiael

CHEQUE NO

Approved By: Janet Samwel Kivuyo

**Purchase Officer** 

1.1.11

**HPMU** 

**Accounting Officer** 

Official Seal

**Supplier Representative**