



Department of Education
Region III
DIVISION OF CITY SCHOOLS
Angeles City



RELEASED

Jesus Street, Pulung Bulu, Angeles City
Tel. Nos. (045) 322-4104; 322-5722 / Fax Nos. (045) 322-4106

By _____
DepED Angeles City
Division of City Schools

July 9, 2018

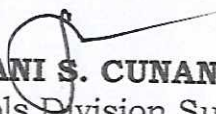
DIVISION MEMORANDUM

No. *278* S. 2018

**VALIDATION OF DELIVERY OF CY 2017 BEFF
SCHOOL FURNITURES PROGRAM OF DEPED REGIONAL OFFICE NO. III**

To: Heads of Public Elementary, Secondary Schools & Senior High Schools

1. For the purpose of validating the delivery of CY 2017 BEFF School Furniture, principals/school heads are required to submit the reply slip attached to this memo.
2. Please see attached letter/reply slip from the COA Audit Team Leader, Madam Princess Lea B. Taroy.
3. For your guidance and strict compliance.


LEILANI S. CUNANAN, CESO VI
Schools Division Superintendent





Republic of the Philippines
COMMISSION ON AUDIT
 Regional Office No. III
DEPARTMENT OF EDUCATION
 Division of Angeles City
 Angeles City, Pampanga



July 2, 2018

Dear School Heads/Principals:

May we request for your assistance for the validation of delivery of the CY 2017 Basic Educational Facilities Fund – School Furniture Program of Dep-Ed Regional Office No. III, with awarded contract to **HANDICAPPED PERSONS PRODUCERS COOPERATIVES**, consists of student armchairs (plastic) and teacher’s table and chair (wood). Please examine/inspect the delivered items.

Email the reply slip @ jen_manansala20@yahoo.com on or before July 15, 2018. Kindly attach the delivery receipt/s of the delivered items as well as pictures if there are any defective items.

Very truly yours,

for: [Signature]
PRINCESS LEA B. TAROY
 Audit Team Leader

REPLY SLIP

Name of School: _____

Date of Delivery: _____

In good condition	With Defects
_____ No. of student armchair	_____ No. of student armchairs
_____ No. of Teacher's table	_____ No. of Teacher's table
_____ No. of Teacher's chair	_____ No. of Teacher's chair

Remarks: _____

Prepared By: _____

Approved By: _____

Name of Property Custodian
 Date: _____

Name of School Head/Principal
 Date: _____