

## **PURCHASE ORDER**

DELIVERY DUE DATE: Pick - Up / (0)

Tel. No.: (045) 606-8142/606-8157

Supplier: **SONAK CORPORATION** 

Address : Sonak Centre Km 18 West Service Road South Luzon

Expressway, Parañaque City

Type of Business: Merchandising

TIN No.: 008-913-923-000 VAT Reg.

(02) 8776-1234 Tel. No.:

PR No.:

2024-02-070

PO No.:

2024-284

Date:

05/03/2024

Mode of Procurement:

**Small Value** 

Gentlemen:

Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Deli Date of Deliv	-	TARLAC STATE UNIVERSITY	Delivery Term: Payment Term:		Pick-up COD	
Item No.	Unit	Description	Quantity	Unit Cost	Total Cost	
7	piece (s)	BALL, for basketball, MOLT-B7G4500, Basketball Premium Comp Leather 12P/S7	10	2,270.00	22,700.00	
11	piece (s)	BOXING, MLER-131005, Mullerguard w/o Strap Clear	6	95.00	570.00	
		PurposeSports Supplies and Materials - APP 1st Quarter 2024			23.270.00	
T						

(Total Amount in Words) Twenty-Three Thousand Two Hundred Seventy Pesos Only

Warranty shall be for a period minimum of Three (3) months for expendable supplies, or a minimum period of one (1) Year for non-expendable supplies. In case of failure to make full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed

Very truly yours,

DR. ARNOLD E. VELASCO

Conforme:

06/120

ONOR

SONAK CORPORATION

(Signature over printed name & date)

Bank Account Name:

SONOK CORPOROTION

Bank Account Number:

1000 - 2000

Bank Name: Bank Address:

Banco OKO HILLS arabang

Funds Available:

YAUDER, CPA ct Officer

Amount:

ALOBS No. : 12-7044/ 724-15-1459

Effectivity Date: August 24, 2020

Form No.: TSU-PRO-SF 09

Revision No. 03



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Procurement Unit

Tel. No.: (045) 606-8142/606-8157

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Expressway, Parañaque City

Type of Business :

<u>Merchandising</u>

TIN No.:

008-913-923-000 VAT Reg.

Tel. No.:

(02) 8776-1234

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Very truly yours,

DR. ARNOLD E. VELASCO

Conforme:

## SONAK CORPORATION

(Signature over printed name & date)

Bank Account Name:

Bank Account Number:

Bank Name:

Bank Address:

Funds Available:

JASPER A YAUDER, CPA

Budget Officer

Form No.: TSU-PRO-SF 09 Revision No. 03

ALOBS No. : 12-70441 7029- 15-1459

Amount: 20 130 . 41

27.270 0

Effectivity Date: August 24, 2020

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