

WORK ORDER

DELIVERY DUE DATE:

3 0 AUG 2024

Procurement Unit

Tel No.: 045-606-0142/ 606-8157

Supplier:

METROPHYSIKA INCORPORATED

Address:

Unit 1, 2/F CDC One Bldg., Chipeco Ave., Ext.,

Halang, Calamba City, Laguna

TIN:

009-211-623-000 VAT Reg.

Tel. No.:

(049) 501-3399/0908-879-6838

Work Order No.: 2024-244

Date:

07/16/2024

10 No. :

2024-239

Date: Mode of Procurement: Small Value

06/13/2024

Mode of Payment:

n/15

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and

QTY.	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
1	lot	LABOR AND MATERIALS: EQUIPMENT CALIBRATION SERVICES Calibration of 4 Open top range with oven (4,800.00), 4 Comb Griddle and Charcoal Broiler (6,000.00), and 4 Salamander Broiler (6,000.00), 4 Thermostat knob 250-250 (6,000.00), 4 gas Oven Igniter (6,000.00), 16 Burner (19,200.00) at TSU Lucinda Campus, Academic Building HTM Dept.	48,000.00	48,000.00

(Please read carefully at the back hereof)

Charge to: 22- Whe Holl

ROA No .: 224 07 2493

CONFORME & RECEIVE COPY:

METROPHYSIKA INCORPORATED

Firm/Dealer/Supplier/Contractor

Bank Account Name: Mctrophysika Inc.

Bank Account Number: 00779009161479

Bank Name: Bounco de Ovo (BDO)

Bank Address: Bonitacio Global Lity - Grand Hamptons

FUNDS AVAILABLE:

JASPER A. YAUDER, CPA

Budget Officer

APPROVED:

DR. ARNØLD E. VELASCO

President d Authorized Official

Form No.: TSU-PRO-SF 10

Revision No.: 01

Effectivity Date: March 01, 2017

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	lot	LABOR AND MATERIALS: EQUIPMENT CALIBRATION SERVICES Calibration of 4 Open top range with oven (4,800.00), 4 Comb Griddle and Charcoal Broiler (6,000.00), and 4 Salamander Broiler (6,000.00), 4 Thermostat knob 250-250 (6,000.00), 4 gas Oven Igniter (6,000.00), 16 Burner (19,200.00) at TSU Lucinda Campus, Academic Building HTM Dept.	48,000.00	48,000.00

(Please read carefully at the back hereof)

Charge to: 12- WWY ROA No.: WW 67 - 2493

CONFORME & RECEIVE COPY:

FUNDS AVAILABLE:

JASPER A YAUDER, CPA

Budget Officer

METROPHYSIKA INCORPORATED

Firm/Dealer/Supplier/Contractor

Date

Bank Account Name:

Bank Account Number: _____

Bank Name:

Bank Address: __

APPROVED:

DR. ARNOLD E. VELASCO

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