

		PURCHASE ORDE	R			
Procurement Unit			DELIVERY	DUE DATE:	1/6/24	
ľ	1611 Unit 45) 606-8142	27.606-8157			7-7-3	
	-	·	1	DD No.	2022 00 252	
Supplier: TRN-TOP CLEANING SUPPLIES TRADING Address: Colle Edward Prov. San Sahartian, Taylor City.			<u> </u>	PR No.: PO No.:	2023-09-352	
Address: <u>Calle Edward, Brgy. San Sebastian, Tarlac City</u> Type of Business: <u>Merchandising</u>				Date:	2023-611	
TIN No.: 614-040-783-00000 Non-VAT			 Mode of Pro		11/28/2023 Small Value	
Tel. No.: (045) 982-5262 / 0920-962-7449			Mode of the	ocur emene.	<u> Miun value</u>	
Gentlemen	`		1			
			1 100			
Please f	urnish thi	s office the following articles subject to the terms	and condition	ons contained	l herein:	
Place of Delivery: TARLAC STATE UNIVERSITY			Delivery Term:		30 calendar days	
Date of Delivery:			Payment Term:		<u>n/15</u>	
Item No.	Unit	Description	Quantity	Unit Cost	Total Cost	
76	roll	TRASH BAG ROLL, (10pcs/roll), small	10	18.00	180.00	
[*********				
	! 	Purpose: to be used in the conduct of the research proposal entitled "Phase 1: Assessment and Authentication of	!			
		Invasive Alien Tree Species Found in Selected Forest Areas				
		of San Jose Tarlac Phase 2: Phytochemical Screening and				
		Antimicrobal Activity of Invasive Ailen Tree Species Found in Selected Forest Areas of San Jose Tarlac, Geraldine R.				
		Gamoso - Lead Author		}		
	ł		·			
	}	j	j	ļ	j	
(Total Amou	ust in Word	s) One Hundred Eighty Pesos Only	<u> </u>			
		e for a period minimum of Three (3) months for exper	ndable supplie	es, or a minim	um period of one	
(1) Year for r	on-expend	able supplies. In case of failure to make full delivery w			•	
tenth (1/10)	of one perc	ent for every day of delay shall be imposed				
/)				Very truly yours,		
			DR. GRACE N. ROSETE			
			Vice President for Administration Authorized Official			
Conforme:	,	17/23		PER 116	11.5	
TDN_TOD	CIFANIN	G SUPPLIES TRADING	*	11000	,	
(Signature over printed name & date)			#	a area ta e se se se		
Bank Account Name:			COMMISSION ON ADDIT TSH			
Bank Account Number:			RECEIVED			
Bank Name:			BY 100000 DEC 0.7-2022			
Bank Addres	s:		Ĭ.		A	
Funds Availa	ble:					
<u> </u>				ALOBS No.: 02-2044-2073-12-2049		
JASPER A. YAUDER, CPA				Amount: 180.4		

Budget Officer Effectivity Date: August 24, 2020 Form No.: TSU-PRO-SF 09 Revision No. 03

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