

PURCHASE ORDER

DELIVERY DUE DATE:

3/24/22

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

Supplier: NEW LA SUERTE HARDWARE CORP.

Address: F. Tañedo, St., Poblacion, Tarlac City

Type of Business:

Merchandising

TIN No.:

203-807-986-000 VAT Reg.

Tel. No.: (045) 982-2766 PR No.:

2022-02-039

PO No.:

2022-103

Date:

3/1/2022

Mode of Procurement:

Small Value

Gentlemen:

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

F	lace of Delivery:
IT	ate of Delivery

TARLAC STATE UNIVERSITY

Delivery Term:

20 calendar days

Date of Delivery:				n/15	
Unit	Description	Quantity	Unit Cost	Total Cost	
tin gal gal pcs liter	PAINT, Gloss latex, white PAINT, Roof guard, spanish red PAINT, Thinner BABY ROLLER, #4", cloth ACRY COLOR, Toluidine red ************************************	3 6 2 5 2	2,500.00 560.00 280.00 45.00 120.00	7,500.00 3,360.00 560.00 225.00 240.00 11,885.00	
	Unit tin gal gal pcs	Unit Description tin PAINT, Gloss latex, white gal PAINT, Roof guard, spanish red gal PAINT, Thinner pcs BABY ROLLER, #4", cloth liter ACRY COLOR, Toluidine red	Unit Description Quantity tin PAINT, Gloss latex, white 3 gal PAINT, Roof guard, spanish red 6 gal PAINT, Thinner 2 pcs BABY ROLLER, #4", cloth 5 liter ACRY COLOR, Toluidine red 2	Unit Description Quantity Unit Cost tin PAINT, Gloss latex, white 3 2,500.00 gal PAINT, Roof guard, spanish red 6 560.00 gal PAINT, Thinner 2 280.00 pcs BABY ROLLER, #4", cloth 5 45.00 liter ACRY COLOR, Toluidine red 2 120.00	

(Total Amount in Words) Eleven Thousand Eight Hundred Eighty Five 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. ARMEE N. ROSEL

VP, Research and Extension Services

Authorized Official

Conforme:

NEW LA SUERTE HARDWARE CORP.

(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.: 02-101101-22-02-0243

Amount:

11,885 -

Effectivity Date: August 24, 2020