

PURCHASE ORDER

DELIVERY DUE DATE: 8/12/2023

Procurement Unit

Telephone No.: 045-606-8142/606-8157

EASTER WEAVING ROOM. INC. Supplier:

Address: #2 Easter Road Guisab, Baguio City

Type of Business:

Trade and Services 000-712-734-000 VAT Reg.

TIN#: Tel. No.:

0920-921-8131 / (074) 619-0043

PR No.: 2023-05-188

PO No.: 2023-294

Date: 7/5/2023

Mode of Procurement: Small Value

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

Place of Delivery:

TARLAC STATE UNIVERSITY

Delivery Term:

30 Calendar days

Date of Delivery:			Payment Term: n/15		
Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	pcs	HANDWOVEN PLACEMAT, Polyester material, assorted color and design with TSU Logo and Embroidered word - Philippines, Sizes 12'x18" ***********************************	200	340.00	68,000.00

(Total Amount in Words) Sixty Eight Thousand Pesos Only

Warranty shall be for a perod 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 percentfor every day of delay shall be imposed.

Very truly yours,

JUL 07 2023

DR. GRACE N. ROSETE Vice President for Administration

Authorized Official

Conform

EASTER WEAVING ROOM. INC. 67/13/2023 (Signature over printed name & date)

Bank Account Name:

EASTER WEAVING ROOM, INC.

00546 0000 700

Bank Account Number:

Bank Name:

Bank Address:

BANCO DE

BAGUID cum

RECEIVED San 001911 13 2023

COMMISSION ON ACOUT. TELL

Funds Available:

IASPER A. YAUDER, CPA

Budget Officer

ALOBS No.: 61-207 512 -2018 -07-0074 Amount: + 6x 000

Effectivity Date: August 24, 2020

Page 1 of 1

Form No.: TSU-PRO-SF-09

Revision No. 3

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ΓIN#:		34-000 VAT Reg.	Mode of Procurement: Small Value				
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		Sizes 12'x18"					

		Purpose: for APP 1st Quarter 2023: General		}	1		
6		Merchandise - Souvenir					
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			Very truly yo	urs,	JUL 07 2023		
			DR. GRACE N. ROSETE				
			Vice President for Administration				
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EASTER W	EAVING R	OOM. INC.					
EASTER WEAVING ROOM. INC. Signature over printed name & date)			COMMISSION ON AUDIT TELL				
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Vice President for Administration

Authorized Official Commission on Autho