

PURCHASE ORDER

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

DELIVERY DUE DATE:

Weekly

PYP AGRO-INDUSTRIES, INC.

Address: 1000 Panganiban St., Tarlac City

Type of Business:

Manufacturing

TIN#

000-540-804-000 VAT REG.

Tel. No.: (045) 982 - 1747 / 1289 / 1228 PR No .:

2024-01-004

PO No .:

2024-532

Date:

08/20/2024

Mode of Procurement:

Small Value

Gentlemen:

Supplier:

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

Place of Delivery:

TARLAC STATE UNIVERSITY

Delivery Term:

Weekly /

Date of Delivery:			Payment Term:		Monthly/
Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	bottle	Purified Drinking Water (5 gal/bottle) ************************************	900 /	30.00	27,000.00
2		Purpose: for University and TSU Hotel consumption for the Month of September 2024 / Terms & Conditions:		ū	
		 Provide hot & cold dispensing units w/o any rental fee or charge. Lend New water containers with their caps on and in good condition. Responsible for the cleaning of all dispensers on a monthly basis. Responsible for maintenance and repair of all dispensers. Consumption of Purified drinking water for the Period of January 1, 2024 to December 31, 2024 With the following Certificates and Permits: 			
1		a. License to Operate as to bottled drinking water processor b. Physio-Chemical Test Certificate c. Microbiological Test Certificate d. Report on Bacteriologic Anatysis Water e. Mayor's Permit f. Sanitary Permit to Operation	,		

(Total Amount in Words) Twenty-Seven Thousand 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 nonexpendable 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

8/22/24

Very truly yours,

D E. VELASCO DR. ARNOX

resident

Authorized Official

PROSURENLENT UNIT

CUPY

Conforme:

PYP AGRO-INDUSTRIES, INC

(Signature over printed name & date)

Bank Account Name:

Bank Account Number:

Bank Name:

Bank Address:

Funds Available:

No.: TSU-PRO-SF-09

JASPER A. YAUDER, CPA

Revision No. 03

Budget Officer

Effectivity Date: August 24, 2020

ALOBS No.: 02-10/101- 2024-08-080/

Amount: # 27060-

CENTREIED

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