

## **PURCHASE ORDER**

Procurement Unit Tel No.: 045-606-8142/606-8157 **DELIVERY DUE DATE:** 

Supplier: **PYP AGRO-INDUSTRIES, INC.** Address: 1000 Panganiban St., Tarlac City

TIN# 000-540-804-000 VAT REG.

Tel. No.: 982 - 1289/1228 PR No .:

2019-12-484

PO No.:

2020-121

Date:

2/27/2020

Mode of Procurement:

Small Value

## Gentlemen:

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

Place of Delivery:

TARLAC STATE UNIVERSITY

Delivery Term:

Weekly Monthly

Date of Delivery:

Payment Term:

			Tayment Term.		Monthly	
Item No.	Unit	Description	Quantity	Unit Cost	Total Cost	
18	gal	Purified Drinking Water (5 gal/pail) ************************************	750	27.50	20,625.00	
		Purpose: for TSU University consumption for the  Month of March 2020				
		Terms & Conditions: 1. 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.  4. Responsible for maintenance and repair of all dispensers.				
		5. Consumption of Purified drinking water for the Period of January 1, 2019 to December 2019				
		6. With the following Certificates and Permits				
		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			8	
		e. Mayor's Permit				
		f. Sanitary Permit to Operation				

(Total Amount in Words) Twenty Thousand Six Hundred Twenty 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,

Conforme:

PYP AGRO-INDUSTRIES, INC. 03-04-20 20

T. TEOFILO

(Signature over printed name & date)

Bank Account Name:

Bank Account Number:

Bank Name:

Bank Address:

Funds Available:

ALOBS No.:

DR. GLENARD T. MADRIAGA VP, Admin. & Finance Authorized Official

COMMISSION ON AUDIT- TSU,

Amount:

Otc, Budget Office No.: TSU-PRO-SF-09

Revision No. 02

Effectivity Date: October 25, 2019