

PURCHASE ORDER

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eL	No.:	(045)	606-	0142/	606-8	157		

2/10/24 **DELIVERY DUE DATE:**

Supplier :	CHRISTIAN HOME FURNISHING
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Brgy. Paraiso, Tarlac City

Type of Business: Merchandising

TIN No.: 102-212-152-000

0917-514-8374 / 0923-736-6419 / 0935-889-1052

PR No.:

2023-10-408

PO No.:

2024-016

Date:

01/03/2024

Mode of Procurement:

Small Value

Gentlemen:

Tel. No.:

Address:

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

Place of Deliv	•	TARLAC STATE UNIVERSITY	RSITY Delivery Term:			
Date of Delivery:			Payment Term:		<u>n/15</u>	
Item No.	Unit	Description	Quantity	Unit Cost	Total Cost	
1	unit	CABINET, filing, lateral, 4-drawers; color: beige; plain finish; body (HxWxL): 52.28" x 17.72" x 35.43"	1	13,000.00	13,000.00	
2	unit	CABINET, filing, vertical, 4-drawers; color: beige; plain finish; body (HxWxL): 52.41" x 24.41 x 18.11"	1	9,500.00	9,500.00	
4	unit	CHAIR, swivel junior executive, ergonomic swivel; mesh backrest	5	3,000.00	15,000.00	
5	set	SALA SET SOFA, 1pc (3 seater), 2pcs (1 seater) with center table, color: black, leather finish with 3pcs pillows	1	20,000.00	20,000.00	
		**************************************			<u>57,500.00</u>	

(Total Amount In Words) Fifty-Seven Thousand Five Hundred 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

DR. GRACE N. ROSETE

Conforme:

CHRISTIAN HOME FURNISHING

(Signature over printed name & date)

Bank Account Name:

Bank Account Number:

Bank Name:

Bank Address:

Funds Available:

Budget Officer

Form No.: TSU-PRO-SF 09 Revision No. 03

Very truly yours,

ALOBS No. : 02-191101-2024-01-0010

Amount: \$37500

Effectivity Date: August 24, 2020

Vice President for Administration

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