

DELIVERY DUE DATE: 2 2 JUN 2024

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

Supplier : Address : TIN : Tel. No. :	SD LEAL GRAPHICS 2195 F YSL Bldg. Leveriza St., Brgy. 29, Pasay City 165-075-259-000 0995-482-1560	Work Order No.: Date : JO No. Date : Mode of Procurement:	2024-160 5/23/2024 2024-126 3/4/2024
SIR/MADAM	1 :	Mode of Payment:	

You are hereby advised to accomplish/deliver the following job/work on Fifteen (15)

upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QTY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
1	lot	LABOR AND MATERIALS: PRINTING SERVICES Printing for The Work's Tabloid 1200 copies - 32 pages of Tabloid (1100 Newsprint and 100 Glossy Paper, Size: 12 x 18 inches Warranty: 60 days ********	89,460.00	89.460.00
Charge to: M- 2014 ROA No.: 2014 - W CONFORME & REC Scalcudo D. (D LEAL GRAPHIC rm/Dealer/Supplier, Jun 7, Date ank Account Name: ank Account Name: ank Address: LB F G orm No.: TSU-PRO	r 1774 ELECAL Contractor 2024 SDL er: 1701- Mounte p bunke p Harrison	eal Graphics D276-00 Jun Philippin branch	UNDS AVAILABLE: JASPER A. YA Budget (APPROVED: DR. ARMOLD resid	Officer E. VELASCO

WORK ORDE

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

SD LEAL GRAPHICS

165-075-259-000

0995-482-1560

2195 F YSL Bldg. Leveriza St., Brgy. 29, Pasay City

DELIVERY DUE DATE: 2 JUN 2024

Work Order No.: 2024-160 Date : 5/23/2024 JO No. 2024-126 Date : 3/4/2024 Mode of Procurement: Small Value Mode of Payment: n/15

SIR/MADAM:

Supplier :

Address :

Tel. No. :

TIN:

You are hereby advised to accomplish/deliver the following job/work on Fifteen (15)

upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency Т

QTY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
1	lot	LABOR AND MATERIALS: PRINTING SERVICES Printing for The Work's Tabloid 1200 copies - 32 pages of Tabloid (110 Newsprint and 100 Glossy Paper, Size x 18 inches Warranty: 60 days ************************************	00	<u>89,460.00</u>
Charge to: 11- 200441 ROA No.: 2014 - 15- 1774 CONFORME & RECEIVE COPY : SD LEAL GRAPHICS Firm/Dealer/Supplier/Contractor Date Bank Account Name: Bank Account Number: Bank Name: Bank Address:			FUNDS AVAILABLE: JASPER A. V Budget APPROVED: DR. ARXOLD Presi	E. VELASCO dent
Form No. : TSU-PRO-	SF 10	Revision No.: 01	ffectivity Date: March 01, 2017	Page 1 of 1

Effectivity Date: March 01, 2017

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