

PURCHASE ORDER

DELIVERY DUE DATE:

| Procurement | Unit |
|-------------|------|
| | |

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

Supplier: STARLAB MEDICAL AND SCIENTIFIC APPARATUS SUPPLY

Address: Zone 031, 930-A Rizal Ave., Santa Cruz, Manila

Type of Business: Merchandising TIN No.: 115-735-600-000 VAT Reg.

Tel. No.: 0999-190-1521 / 0917-102-6207 / (046) 471-8707

PR No.:

2023-12-497

PO No.:

2024-107

Date:

2/6/2024

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 Date of Delivery: | | Delivery Term: Payment Term: | | 30 calendar days n/15 | |
|--|--------------|---|----------|--------------------------|--------------------------------|
| Item No. | Unit | Description | Quantity | Unit Cost | Total Cost |
| 11 15 | piece box | CLEAR GLASS, 24ml (6 dram), Kimax FACE MASK, 3ply, ear-toop ********************************** | 100 3 | 84.00 140.00 | 8,400.00 420.00 8,820.00 |

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

DR. GRACEW. ROSETE Vice President for Administration

Authorized Official

Conforme:

STARLAB MEDICAL AND SCIENTIFIC APPARATI

(Signature over printed name & date)

Bank Account Name: Stan

medical and Scientific Ground Bank Account Number: \

Bank Name: Bank Address:

Funds Available:

JASPER A. YAUDER, CPA

Budget Officer

Effectivity Date: August 24, 2020

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ALOBS No.: \$1-102101-2024-02-007-7 Amount: # xx 20-

Form No.: TSU-PRO-SF 09

Revision No. 03



PURCHASE ORDER

DELIVERY DUE DATE: 3/20/24

| Procurement | Unit |
|-------------|------|

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

| Supplier: STA | <u>RLAB MEDICAL</u> | AND SCIENTIFIC | <u>APPARATUS SUPPLY</u> |
|---------------|---------------------|----------------|-------------------------|
|---------------|---------------------|----------------|-------------------------|

PR No.:

2023-12-497

Address: Zone 031, 930-A Rizal Ave., Santa Cruz, Manila

PO No.:

2024-107

Merchandising

Date:

2/6/2024

Type of Business: TIN No.: 115-735-600-000 VAT Reg.

Mode of Procurement:

Small Value

Tel. No.: <u>0999-190-1521 / 0917-102-6207 / (046) 471-8707</u>

Gentlemen:

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> Very truly yours, N. ROSETE Vice President for Administration Authorized Official

Conforme:

STARLAB MEDICAL AND SCIENTIFIC APPARATUS SUPPLY

(Signature over printed name & date) Bank Account Name: Bank Account Number:

Bank Name: Bank Address:

Funds Available:

Form No.: TSU-PRO-SF 09

IASPER A. YAUDER, CPA

Budget Officer Revision No. 03 ALOBS No.: 11-102101-2024-02-0077

Amount: ₱ 💥 20-

Effectivity Date: August 24, 2020

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