

PURCHASE ORDER

DELIVERY DUE DATE: 3 17 24

Tel No. 043-666-8142/666-8157

Supplier: MAGS MASTER ENTERPRISES INC.

Address: Mac Arthur Highway Estrada, Capas, Tarlac

Type of Business: Merchandising TIN No.: 605-613-315-00000 VAT Reg.

Tel. No.: <u>0933-855-3313</u>

PR No.:

2023-12-505

PO No.:

2024-103

Date:

02/06/2024

Mode of Procurement:

Effectivity Date: August 24, 2020

Page 1 of 1

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:		20 calendar days n/15	
Item No.	Unit	Description	Quantity	Unit Cost	Total Cost	
1	piece	TIRES, 205/65/R15 with mounting balancing Yokohama Aspec for Innova	2	7.150.00	14,300.00	
		Balancing	2	150.00,	300.00	
		Tire Valve	2	100.00	200.00	
		Wheel Weights	1	150.00	150.00	
		Free: Mounting, Dismounting			14,950,00	
		Warranty: 1 yr warranty (air pocket only)				
		Purpose: for Maintenance Service of Innova SLF-320		MISSION		
				Morne		
			()	(KEUETV#	M =1	
			[3]	BY: pu	ンジー	
			13	*		
				24%	.57	

(Total Amount in Words) Forteen Thousand Nine Hundred Fifty Pesos Only

Warranty shall be for a period minimum of Three (3) months for expendable supplies, or a minimum period of one (1) (1/10) of one percent for every day of delay shall be imposed

Year for non-expendable supplies. In case of failure to make full delivery within the time specified above, a penalty of one-tenth Very truly yours, DR. GRACE NAOSETE Vice President for Administration Authorized Official Conforme <u>MAGS MASTER E</u> (Signature over printed name & date) Bank Account Name Bank Account Number Bank Name: Bank Address: Funds Available: ALOBS No.: 11-10444F 1014-02-6330 JASPER A. YAUDER, CPA Amount: # 14950-Budget Officer No.: TSU-PRO-SF-09 Revision No. 03







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

DELIVERY DUE DATE:

3/7-124

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Type of Business: Merchandising TIN No.: 605-613-315-00000 VAT Reg.

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		**************************************	No. TAIL	RECEIVED TO THE STATE OF THE ST	

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Very truly yours,

DR. GRACE NAROSETE

Vice President for Administration

Authorized Official

Conforme:

MAGS MASTER ENTERPRISES 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

ALOBS No. : 12-204441- 2024-02-0330

Amount: \$ 14950-

Effectivity Date: August 24, 2020

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