



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE: 25 JUL 2024

Supplier : **LUCKY 2 NON-SPECIALIZED WHOLESALE TRADING**

PR No.: 2024-02-093

Address : **Atlanta St. Niñas Ville, Brgy. Suizo, Tarlac City**

PO No.: 2024-402

Type of Business: **Merchandising Business**

Date: 6/6/2024

TIN#: **482-667-684-000 Non-VAT**

Mode of Procurement: Small Value

Tel. No. : **0969-475-2805 / 0932-221-0201**

Gentlemen:

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

Place of Delivery: **TARLAC STATE UNIVERSITY**

Delivery Term: 30 Calendar days

Date of Delivery:

Payment Term: n/15

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
26	piece	TRASH BINS, Outdoor trash can with pedals, 30liters	2	1,320.00	2,640.00 ✓
27	piece	TRASH BINS, Outdoor trash can with pedals, 50liters	1	1,920.00	1,920.00 ✓
28	piece	MIRROR, Whole Body Stand Mirror Floor, Wall Mount, Fully Body Mirror, Metal Frame	2	4,900.00	9,800.00 ✓
30	piece	ELECTRIC SCENT DIFFUSER, USB Air Humidifier, Specifications: Rated input: DC5.0V/2.0A, Rated power: ≤4.5W, water tank capacity: 180ml, Product material: ABS/PP/electronic components	3	1,560.00	4,680.00 ✓
34	pack	TISSUE, 3-ply x 175 pulls (3pcs/pack)	15	230.00	3,450.00 ✓
35	piece	TISSUE DISPENSER, Tissue Box Dispenser Bamboo/wooden lid round	5	495.00	2,475.00 ✓
36	piece	TISSUE DISPENSER, Tissue Box Dispenser Bamboo/wooden lid rectangular	5	495.00	2,475.00 ✓
					27,440.00

Purpose: for Establishment of DOST-TSU Aslagan TBI

(Total Amount in Words) Twenty-Seven Thousand Four Hundred Forty 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. ARNOLD E. VELASCO
President

Authorized Official

Conforme:

LUCKY 2 NON-SPECIALIZED WHOLESALE TRADING

(Signature over printed name & date)

Bank Account Name: _____

Bank Account Number: _____

Bank Name: _____

Bank Address: _____

Funds Available:

JASPER A. YAUDER, CPA
Budget Officer

ALOBS No. : 02786003-774-16-0725

Amount : 27,440.00