



PURCHASE ORDER

DELIVERY DUE DATE: 11/28/23

Procurement Unit

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

Supplier : **BELMAN LABORATORIES**
Address : **Belman Building, #78 Cordillera St., cor. Quezon Ave.,
Brgv. Doña Josefa, Quezon City**
Type of Business : **Merchandising**
TIN No. : **000-391-662-000 VAT Reg.**
Tel. No. : **0917-190-4444 / (02) 8712-0201**

PR No.: **2023-08-326**
PO No.: **2023-473**
Date: **9/21/2023**
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		Delivery Term:	60 calendar days	
Date of Delivery:			Payment Term:	n/15	
Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
20	pack	GIBBERELIC ACID, 1G Loba Chemie	3	1,276.00	3,828.00
21	bottle	SODIUM HYDROXIDE, Pellets AR 98% 500G Loba Chemie *****	3	884.00	2,652.00
<i>Purpose: for the conduct of the study entitled "Effects of Weed-Based Plant Growth Regulator on the Seed Germination of some High Value Crops" by Ms. Geraldine R. Gamoso</i>					6,480.00

(Total Amount in Words) Six Thousand Four Hundred Eighty 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,

COMMISSION ON AUDIT - TSU

RECEIVED

DATE SEP 29 2023

DR. GRACE N. ROSETE
Vice President for Administration
Authorized Official

Conforme: 9/29/23
CARREN UGTUHAN
TECHNICAL SALES REPRESENTATIVE

BELMAN LABORATORIES

(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.: 12-102107 2023-09-0772
Amount: ₱6,480



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Very truly yours,

DR. GRACE N. ROSETE
Vice President for Administration
Authorized Official *[Signature]*

Conforme:



BELMAN LABORATORIES
(Signature over printed name & date)

Bank Account Name: _____
Bank Account Number: _____
Bank Name: _____
Bank Address: _____

Funds Available:
[Signature]
JASPER A. YAUDER, CPA
Budget Officer

ALOBS No. : 12-102101 2023-09-0772
Amount : ₱6480-