



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE: 30 JUN 2024

Supplier : **COPYLANDIA OFFICE SYSTEMS CORPORATION**
 Address : **252 AB Fernandez Ave. Dagupan City**
 Type of Business : **Merchandising**
 TIN No. : **002-332-000-021 VAT Reg.**
 Tel. No. : **075-5153306 / Fax: 075-5223267 / 0917-6527393**

PR No.: **2024-04-184**
 PO No.: **2024-345**
 Date: **5/22/2024**
 Mode of Procurement: **Direct Contracting**

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
1	piece	TONER COPIER, Develop INEO + 1070, TN619, Black	5	8,850.00	44,250.00
2	piece	TONER COPIER, Develop INEO + 1070, TN619, Cyan	5	15,200.00	76,000.00
3	piece	TONER COPIER, Develop INEO + 1070, TN619, Magenta	5	10,600.00	53,000.00
4	piece	TONER COPIER, Develop INEO + 1070, TN619, Yellow	5	13,750.00	68,750.00
***** Purpose: APP - 2024 2nd Quarter Print Shop (For Office use)					242,000.00

VIRGILIO D. ZAMORA JR.
 05-31-2024

(Total Amount in Words) Two Hundred Forty-Two Thousand 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,

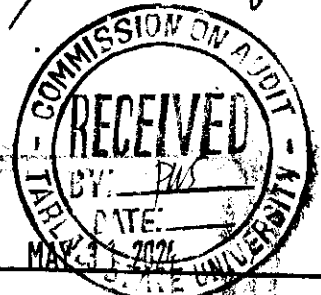
Conforme:
VIRGILIO D. ZAMORA JR.

DR. ARNOLD E. VELASCO
 President
 Authorized Official

COPYLANDIA OFFICE SYSTEMS CORPORATION

(Signature over printed name & date)

Bank Account Name: COPYLANDIA OFFICE SYSTEMS CORP.
 Bank Account Number: 0051426452
 Bank Name: LBP
 Bank Address: MAKATI CITY



Funds Available:
JASPER A. TAUDER, CPA
 Budget Officer

ABOBS No.: **11-10771-2024-0060**
 Amount: **₱ 242,000**



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Very truly yours,

DR. ARNOLD E. VELASCO
President

Authorized Official

Conforme:

COPYLANDIA OFFICE SYSTEMS CORPORATION

(Signature over printed name & date)

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



Funds Available:

IASPER A. YAUDER, CPA
Budget Officer

ALOBS No. : 12-207512-2024-05-006 0
Amount : 242000