



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE:

Supplier : **MAGIC STAR SUPERMARKET**

Address : Cut Cut 1st, Tarlac City

Type of Business : Merchandising

TIN No. : 206-818-612-000 VAT Reg.

Tel. No. : (045) 628-4290

PR No.: 2022-04-102

PO No.: 2022-177

Date: 4/8/2022

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: Pick-up

Date of Delivery:

Payment Term: C.O.D

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
4	bottle	FOOD FLAVORING, Vanilla, Neco 60ml ***** <i>Purpose: DOST-ECEST Extension Project</i>	2	16.80	<u>33.60</u>

COMMISSION ON AUDIT - TSU
RECEIVED
By: _____ Date: APR 22 2022

(Total Amount in Words) Thirty Three Pesos & Sixty Centavos

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. ARMEEN. ROSEL
VP, Research & Extension Services
Authorized Official

Conforme:

4/8/22

MAGIC STAR SUPERMARKET

(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. :

Amount :