



PURCHASE ORDER

Procurement Unit

Telephone No.: (045) 606-8110 local 157/142

DELIVERY DUE DATE: 17 AUG 2025

Supplier : <u>LYS MEDICAL SUPPLIES TRADING</u> Address : <u>La Torre, Talavera, Nueva Ecija</u> TIN : <u>250-512-291-00003 VAT Reg.</u> Contact No : <u>0917-523-0771</u>	P.O. No. : <u>2025-383</u> Date : <u>7/11/2025</u> Mode of Procurement : <u>NP - Small Value Procurement (SVP)</u>
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Gentlemen:
 Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery : <u>TARLAC STATE UNIVERSITY</u> Date of Delivery : _____	Delivery Term : <u>30 calendar days</u> Payment Term : <u>n/15</u>
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Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
28	tablet	ANTISPASMODIC, Buscopan Plus, Hyoscine N-Butylbromide + Paracetamol 10mg/500mg, Exp. Date not less than 1 1/2yrs	800	43.50	34,800.00
39	bottle	EYE DROP, Maxitrol, Exp. Date not less than 1 1/2yrs	5	580.00	2,900.00
40	bottle	EYE DROP, Visine (red), Exp. Date not less than 1 1/2yrs	5	210.00	1,050.00
42	capsule	MUCOLYTIC, Zistam A, Ambroxol + Levocetirizine 75mg/5mg, Exp. Date not less than 2yrs	500	39.80	19,900.00
49	tube	PAIN RELIEVER, Ketoprofen Gel, Exp. Date not less than 2yrs	20	680.00	13,600.00
54	bottle	SPRAY, Sunto, Cool Spray 250ml, not less than 1 1/2yrs	10	550.00	5,500.00
					77,750.00

 Purpose: for clinic use. Medicines - APP 2nd Quarter 2025



Seventy-Seven Thousand Seven Hundred Fifty Pesos Only

In case of failure to make the 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 on the undelivered item/s. Contract may be terminated in whole or in part, at anytime for the convenience of the Government upon thirty (30) calendar days' written notice, if determined the existence of conditions make the project implementation economically, financially or technically impractical and/or unnecessary, such as, but not limited to, fortuituos event/s or changes in law, and national government policies.

Conforme:

 Signature over Printed Name of Supplier

 Date

Very truly yours,

DR. ARNOLD E. VELASCO
 President

 Authorized Official

Fund Cluster : _____

Funds Available : _____

JASPER A. YAUDER, CPA
 Budget Officer

ORS/BURS No. : 02-202441-2025-07-2025

Date of the ORS/BURS: July 16, 2025

Amount : 77,750.00