



# PURCHASE ORDER

**DELIVERY DUE DATE: 04 AUG 2024**

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

Supplier: **SAIYAN CONSUMER GOODS TRADING**  
Address: **Sampaguita St., Cubcub (Pob.) 2315 Capas, Tarlac City**  
Type of Business: **Merchandising**  
TIN No.: **325-355-605-000 VAT Reg.**  
Tel. No.: **(63) 928 1717 0801 / (63) 928 9646 0250**

PR No.: **2024-04-182**  
PO No.: **2024-446**  
Date: **06/27/2024**  
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: **30 calendar days**  
Date of Delivery: \_\_\_\_\_ Payment Term: **n/30**

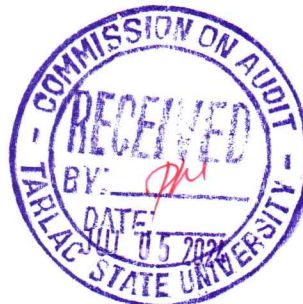
| Item No.   | Unit      | Description                     | Quantity | Unit Cost | Total Cost              |
|--|-----------|---------------------------------|----------|-----------|-------------------------|
| 23   | bottle(s) | INK CARTRIDGE, HP 953 (Cyan)    | 10       | 1,160.00  | 11,600.00               |
| 24   | bottle(s) | INK CARTRIDGE, HP 953 (Magenta) | 10       | 1,160.00  | 11,600.00               |
| 25   | bottle(s) | INK CARTRIDGE, HP 953 (Yellow)  | 10       | 1,160.00  | 11,600.00               |
| *****<br>purpose: Printer Consumables 1st Quarter 2024 |           |                                 |          |           | <b><u>34,800.00</u></b> |

(Total Amount in Words)Thirty Four Thousand Eight Hundred 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: 7/5/24

**SAIYAN CONSUMER GOODS 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.: **02-76444-2024-07-2146**  
Amount: **34,800.00**