



PURCHASE ORDER

DELIVERY DUE DATE: 11/13/22

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

Supplier: **NEW LA SUERTE HARDWARE CORP.**
Address: **F. Tañedo, St., Poblacion, Tarlac City**
Type of Business: **Merchandising**
TIN No.: **203-807-986-000 VAT Reg.**
Tel. No.: **(045) 982-2766**

PR No.: **2022-08-209**
PO No.: **2022-454**
Date: **10/7/2022**
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: **30 calendar days**
Date of Delivery: _____ Payment Term: **n/30**

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
3	pcs	TEE Joint, G.I. 3 inch	6	750.00	4,500.00
4	pcs	Elbow Joint, G.I. dia.3 inch	12	550.00	6,600.00
7	pcs	B.I. Pipe, 4 INCH DIA.X 20 FT X s.40 /6mm thick	4	4,950.00	19,800.00
10	pcs	Angle Bar, 1.5" X 20' 1/4" thick	12	950.00	11,400.00
11	pcs	Steel Plate, 4'x8' x 1/2" thick, mild steel	2	19,000.00	38,000.00
17	pcs	PVC Blue Socket Reducer, 3/4"X1/2"	448	7.00	3,136.00
18	pcs	PVC Blue Tee Joint, 1 1/4"	32	30.00	960.00
20	pcs	PVC Blue Socket Reducer, 1 X 3/4	32	12.00	384.00
21	pcs	PVC Blue Union Patente, 3/4"	32	40.00	1,280.00
23	pcs	PVC Blue Coupling, 3/4"	35	6.00	210.00
26	pcs	Deformed Bar, 12mmx 20ft	60	230.00	13,800.00
27	pcs	Deformed bar, 8 mmx 20ft	100	120.00	12,000.00
					112,070.00

Purpose: to be used in fabrication of Integrated Solar Power Generator and Water Irrigation Pump (PHASE 3) (DA-3 RFO project)

(Total Amount in Words) One Hundred Twelve Thousand Seventy 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. GRACE N. ROSETE
Vice President for Administration
Authorized Official

Conforme:

NEW LA SUERTE HARDWARE CORP.

(Signature over printed name & date)

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

COMMISSION ON AUDIT- TSU
RECEIVED
Date **OCT 14 2022**

Funds Available:

JASPER A. YAUDER, CPA
Budget Officer

ALOBS No. :
Amount :