



PURCHASE ORDER

DELIVERY DUE DATE: *pick-up*

Procurement Unit
Tel No.: 045-606-0142

Supplier : DAGUPAN SOLAR POWER AND GENERAL MERCHANDISE	PR No.: 2019-03-124
Address : #1 Balingit Sudb., Tambac District, Dagupan City	PO No.: 2019-447
TIN#: 409-601-444-002 Non-VAT	Date: 7/5/2019
Tel. No. : (075) 529-1816	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: COD

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
4	pcs	CIRCUIT BREAKER, Mini, 220 VDC 100A	4	583.00	2,332.00
6	pcs	CIRCUIT BREAKER, Mini, 30A, 220A VAC	4	185.50	742.00
8	pcs	WATER PUMP, Motor, 12-24 VDC 350W (35L/min. or 3.5 m³/hr) 1in. Diameter inlet outlet	2	6,201.00	12,402.00
9	pcs	WATER PUMP, Motor, 12-24 VDC 350-550W 32mm Diameter, 20 meters	2	9,160.00	18,320.00
***** <i>Purpose: Fabrication and installation of solar powered generator and multipurpose irrigation pump project - SUPPLEMENTAL APP 2019</i>					<u>33,796.00</u>

(Total Amount in Words) Thirty Three Thousand Seven Hundred Ninety Six Pesos Only

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.

COMMISSION ON AUDIT - TSU
 RECEIVED
 BY: *[Signature]* Date: _____ Time: _____

Very truly yours,

[Signature]
DR. GLENARD T. MADRIAGA
 VP, Admin. & Finance
 Authorized Official

Conforme:

[Signature]
Alfred Sy

23 JUL 2019
 1:47pm
 7-23-2019

DAGUPAN SOLAR POWER AND GENERAL MERCHANDISE

(Signature over printed name & date)

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

Funds Available:

[Signature]
JESUS S. DAF GANAN
 Budget Officer IV

ALOBS No. :
 Amount :

ok noted 7/20/19



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By: *[Signature]* Time: 23 JUL 2019

[Signature]
DR. GLENARD T. MADRIAGA
VP, Admin. & Finance
Authorized Official *[Signature]*

Conforme:

DAGUPAN SOLAR POWER AND GENERAL MERCHANDISE

(Signature over printed name & date)

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

Funds Available: <i>[Signature]</i> JESUS S. DANGANAN Budget Officer IV	ALOBS No. : Amount :
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