



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE:

10/4/2020

Supplier: **BAN BEE COMMERCIAL CO., INC.**

Address: 856 Claro M. Recto Avenue, Tutuban, Manila

Type of Business: Merchandising Business

TIN#: 001-609-075-000 VAT Reg.

Tel. No.: 02-244-3724

PR No.: 2020-08-161

PO No.: 2020-302

Date: 9/1/2020

Mode of Procurement: Shopping Small Value

shopping

Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery:

TARLAC STATE UNIVERSITY

Date of Delivery:

Delivery Term: 30 Calendar Days

Payment Term: N/30

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
71	ream	PAPER, Multicopy A4, 80 GSM, size: 210mm x 297mm, ik or hard copy Purpose: for office use of various offices/colleges	510	198.00	100,980.00

COMMISSION ON AUDIT - TSU
RECEIVED
 By: *[Signature]* Date: 04 SEP 2020 Time: _____

(Total Amount in Words) One Hundred Thousand Nine Hundred Eighty 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. GLENARD T. MADRIAGA
VP, Admin. & Finance
Authorized Official

Conforme:

BAN BEE COMMERCIAL CO., INC.

(Signature over printed name & date)

Bank Account Name:

Bank Account Number:

Bank Name:

Bank Address:

BAN BEE COMMERCIAL CO., INC.
858 CLARO M. RECTO AVENUE
BINGOND, MANILA PHILIPPINES
TELEPHONE 244-3716, Fax: 244-3728
email: banbee@gmail.com
TIN # 001-609-075-000

9/4/2020

Funds Available:

ELENA MANSUETO VICOFILO
Head, Budget Office

ALOBS No. :
Amount :

No.: TSU-PRO-SF-09

Revision No. 03

Effectivity Date: August 24, 2020

Page 1 of 1

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noted
9/9/20*



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Conforme:

BAN BEE COMMERCIAL CO., INC.
(Signature over printed name & date)
Bank Account Name: _____
Bank Account Number: _____
Bank Name: _____
Bank Address: _____

Funds Available:

[Signature]
ELENA MAY T. TEOFILO
Head, Budget Office

ALOBS No. :
Amount :