



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE: Pick-Up/COD

Supplier : **NATIONAL PRINTING OFFICE**
 Address : C-4, Diliman, Quezon City, Metro Manila
 Type of Business : Merchandising
 TIN No. : 000-769-754-000
 Tel. No. : (02) 8925 2190 / 8925-2186 / 0917-805-5616

PR No.: 2025-01-025
 PO No.: 2025-101
 Date: 02/11/2025
 Mode of Procurement: Agency to Agency

Gentlemen:

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

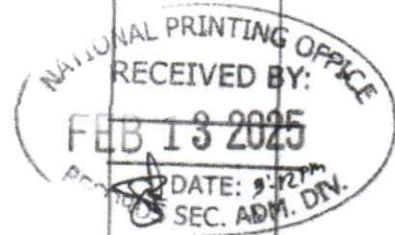
Place of Delivery: **TARLAC STATE UNIVERSITY**

Delivery Term: Pick-up

Date of Delivery:

Payment Term: COD

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	piece	ACCOUNTING FORM, No. 81 Index of Payments to Employees ***** <i>Purpose: Direct Accountable Form - for office use. APP 1st 2025</i>	750	2.25	1,687.50



(Total Amount in Words) One Thousand Six Hundred Eighty-Seven Pesos and Fifty Centavos 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

Conform
SOFIA M. BATILARAN
Acting Chief, SMD

2/13/25

NATIONAL PRINTING OFFICE

(Signature over printed name & date)

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



Funds Available:

JASER A. YAUDER, CPA
Budget Officer

ALOBS No. : 02-10664 2025-0546
Amount : 1,687.50



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DR. ARNOLD E. VELASCO
President

Authorized Official

Conforme:

NATIONAL PRINTING OFFICE

(Signature over printed name & date)

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



Funds Available:

Jasper A. Yauder
JASPER A. YAUDER, CPA
Budget Officer

ALOBS No. : *02-2024-1-2025-02-0546*
Amount : *1,687.50*