



# PURCHASE ORDER

**DELIVERY DUE DATE:** 04-10-2020

Procurement Unit

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

Supplier: **PRINTMEDIEN TRADING CORP.**  
 Address: Unit 15 B, Greenrich Mansion Bldg. Lourdes Drive,  
 Corner Per Drive, Ortigas, Pasig City  
 TIN#: 006-582 339-000 VAT Reg.  
 Tel. No.: 0917-5080161 / 02-6877092 / Fax: 02-6311685 loc. 107

PR No.: 2020-02-039  
 PO No.: 2020-143  
 Date: 3/10/2020  
 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
90	roll	LAMINATING FILM, Glossy cold, 50" x 164" 90mic	1	1,970.00	1,970.00
91	roll	STICKER, Vinyl, 4.16' x 164 90mic	3	2,880.00	8,640.00
99	roll	TARPAULIN ROLLS, 3.3' x 164' 9oz.	10	1,300.00	13,000.00
100	roll	TARPAULIN ROLLS, 4.5' x 164' 12oz.	10	2,000.00	20,000.00
101	roll	TARPAULIN ROLLS, 6' x 164' 12oz.	10	2,700.00	27,000.00
102	roll	WELDING TAPE, Avery Tarp, 1" x 50m	2	365.00	730.00
..... Purpose: APP 2020 - 1st Qtr					<b>71,340.00</b>

(Total Amount in Words) Seventy One Thousand Three Hundred Forty 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. GLENNARD T. MADRAGA  
 VP, Admin. & Finance  
 Authorized Official

Conforme  
 Cathelyn Quinsig  
 PRINTMEDIEN TRADING CORP. w/ 3/11/2020

(Signature over printed name & date)

Bank Account Name: \_\_\_\_\_  
 Bank Account Number: \_\_\_\_\_  
 Bank Name: \_\_\_\_\_  
 Bank Address: \_\_\_\_\_  
 Funds Available: \_\_\_\_\_

COMMISSION ON AUDIT - TSU  
 RECEIVED  
 By: [Signature] Date: 11 MAR 2020

ELENA MAY T. TEOFILO  
 OIC, Budget Office

ALOBS No.: \_\_\_\_\_  
 Amount: \_\_\_\_\_

NSU-PRO-SF-09

Revision No. 02

Effectivity Date: October 25, 2019

Page 1 of 1

meted  
 3/11/2020



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(Signature over printed name & date)

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Bank Account Number: \_\_\_\_\_  
Bank Name: \_\_\_\_\_  
Bank Address: \_\_\_\_\_



Funds Available:  
  
**ELENA MAY T. TEOFILO**  
OIC, Budget Office

ALOBS No. :  
Amount :