



# PURCHASE ORDER

**DELIVERY DUE DATE:** Weekly

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

Supplier : **PYP AGRO-INDUSTRIES, INC.**  
Address : 1000 Panganiban St., Tarlac City  
Type of Business : Manufacturing  
TIN # 000-540-804-000 VAT REG.  
Tel. No.: 982 - 1289/1228

PR No.: 2023-01-010  
PO No.: 2023-187  
Date: 4/26/2023  
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**  
Date of Delivery:

Delivery Term: Weekly  
Payment Term: Monthly

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	bottle	Purified Drinking Water (5 gal/bottle) ***** Purpose: for University and TSU Hotel consumption for the Month of May 2023 <b>Terms &amp; Conditions :</b>  1. Provide hot & cold dispensing units w/o any rental fee or charge. 2. Lend New water containers with their caps on and in good condition. 3. Responsible for the cleaning of all dispensers on a monthly basis.  4. Responsible for maintenance and repair of all dispensers. 5. Consumption of Purified drinking water for the Period of January 1, 2023 to December 31, 2023 6. With the following Certificates and Permits: a. License to Operate as to bottled drinking water processor b. Physio-Chemical Test Certificate c. Microbiological Test Certificate d. Report on Bacteriologic Analysis Water e. Mayor's Permit f. Sanitary Permit to Operation	810	30.00	<b><u>24,300.00</u></b>

(Total Amount in Words) Twenty Four Thousand Three Hundred 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,

*[Signature]*  
**DR. GRACE N. ROSETE**  
Vice President for Administration  
Authorized Official *[Signature]*

Conforme:

**PYP AGRO-INDUSTRIES, INC.**  
(Signature over printed name & date)

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

COMMISSION ON AUDIT - TSU  
**RECEIVED**  
APR 27 2023  
Date: \_\_\_\_\_ Time: \_\_\_\_\_

Funds Available:  
*[Signature]*  
**JASPER A. YAUDER, CPA**  
Budget Officer

ALOBS No.: 02-204441- 2023-01-0948  
Amount: ₱ 24,300