



PURCHASE ORDER

DELIVERY DUE DATE: 21 JUN 2024

Procurement Unit

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

Supplier: **HIGH VISION GENERAL MERCHANDISING CORP.**

Address: **Tarlac City**

Type of Business: **Merchandising Business**

TIN#: **605-160-668-0000 VAT Reg.**

Tel. No.: **0947-768-2043/ 0917-132-3245**

PR No.: **2024-02-088**

PO No.: **2024-290**

Date: **5/7/2024**

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/15**

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
11	piece	FIELD THERMOMETER , Fly fishing thermometer, Figatia	2	390.00	780.00
13	piece	SQUARE SAMPLING BOTTLE , (500ml), HOPE Plastic with blue cap Prevent Theft Clasp Inner Pad High Density Polyethylene Labware, (Milky White), Cover Height: 147mm, Labeling Height: 60mm, Label width: 59mm, Length: 74mm, Width: 74mm, Inner diameter of bottle: 49mm, Weight: 67.2g±1, PS: manual measurement, please understand the error	10	820.00	8,200.00
15	piece	DIGITAL DISSOLVED OXYGEN METER , Smart sensor, Digital Lux Meter AS803, 180° Rotatable, 16.5cm/6.50in. 2.7cm/1.06in. 5cm/1.97in	1	5,000.00	5,000.00
19	piece	AUTOCLAVABLE TEST TUBE RACK ***** <i>Purpose: Water Quality and Plant Diversity Analysis on longitudinal Riparian zone of Camiling River. Lead Author: Jaidriel Meg G. Cabanding</i>	3	500.00	1,500.00
					15,480.00

(Total Amount in Words) Fifteen Thousand Four 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,

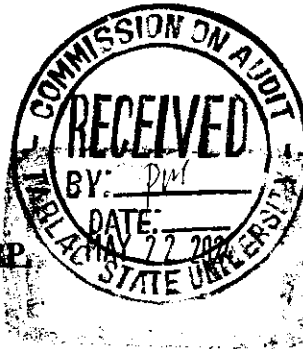
DR. ARNOLD E. VELASCO

President

Authorized Official

Conforme:

5/22/24



HIGH VISION GENERAL MERCHANDISING CORP.

(Signature over printed name & date)

Bank Account Name:

Bank Account Number:

Bank Name:

Bank Address:

Funds Available:

JASPER A. YAUDER, CPA

Budget Officer

ALOBS No.: **62-70644-2024-05-6825**

Amount: **15,480.00**