



PURCHASE ORDER

Procurement Unit
Telefax No.: 045-982-4630

DELIVERY DUE DATE: 16 JAN 2025

Supplier: **DELMARK CRAFTERS FURNITURE AND FIXTURE TRADING**
Address: **12 Manga St., Amparo Subd., Brgy 179 Caloocan City**
Type of Business: **Furniture**
TIN No.: **103-803-789-0000 Vat Reg.**
Tel. No.: **02 825 9955 / 0906 513 4167**

PR No.: **2024-09-370**
PO No.: **2024-756**
Date: **11/26/2024**
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**
Date of Delivery: _____
Delivery Term: **30 calendar days**
Payment Term: **n/15**

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	unit	CONFERENCE TABLE -Material: Wooden -Color: White -Dimension (cm): 240Lx120Wx75H -Shape: Rectangular -8-10 seater Warranty: 1 year ***** <i>Purpose: for office used.</i>	1	19,000.00	19,000.00

(Total Amount in Words) Nineteen Thousand 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:

[Signature]
VICTORIA E. DULA

12/17/24

DELMARK CRAFTERS FURNITURE AND FIXTURE TRADING

(Signature over printed name & date)

Bank Account Name: **DELMARK Crafters Furniture and Fixture Trading**
Bank Account Number: **0481147468**
Bank Name: **Land Bank of the Philippines-Caloocan Branch**
Bank Address: **Caloocan City**



Funds Available:

[Signature]
JASPER A. YAUDER, CPA
Budget Officer

ALOBS No.: **22-MCM-1-2024-12-1448**
Amount: **19,000.00**

Form No.: TSU-PRO-SF 09 | Revision No. 03

Effectivity Date: August 24, 2020 | Page 1 of 1



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Conforme:

Very truly yours,
DR. ARNOLD E. VELASCO
President
Authorized Official

DELMARK CRAFTERS FURNITURE AND FIXTURE TRADING
(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. : 02-MAR-2024-0-4148
Amount : 19,000.00