



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

PURCHASE ORDER

DELIVERY DUE DATE: 5/5/24

Supplier: **ABELTRADE ENTERPRISES CORPORATION**
Address: **San Bartolome, Novaliches, Quezon City**
Type of Business: **Merchandising**
TIN No.: **620-290-348-0000 VAT Reg.**
Tcl. No.: **02-7755-0880/0928-791-275**

PR No.: **2024-01-009**
PO No.: **2024-187**
Date: **03/25/2024**
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
1	piece	AUTODARKENING WELDING HELMET	6	1,215.00	7,290.00
10	pair	SAFET SHOES, (1pc-size 5), (1pc-size 7), (3pcs-size 8), (5pcs-size 9)	10	1,098.00	10,980.00
11	pair	WELDING GLOVES, Leather 14"	10	160.00	1,600.00
13	pair	WORKING GLOVES, Cotton	100	14.70	1,470.00
***** Purpose: Fabrication Consumables and PPE - APP 1st Quarter 2024					21,340.00



(Total Amount in Words) Twenty-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. ARNOLD E. VELASCO
University President
Authorized Official

Conforme: *[Signature]* 4/5/24
MARCELO M. HERRERA

ABELTRADE ENTERPRISES CORPORATION

(Signature over printed name & date)

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

Funds Available:

IASPER A. YAUDER, CPA
Budget Officer

AL OBS No.: **02-16241-2024-05-0246**
Amount: **21,340**



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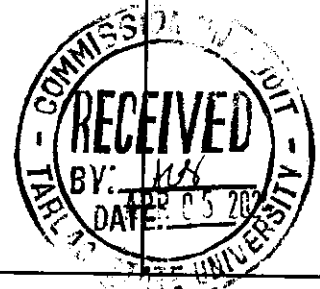
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