



PURCHASE ORDER

DELIVERY DUE DATE: 6/29/19

Procurement Unit
Telefax No.: 045-982-4630

Supplier: **MT. ZION SCIENTIFIC, INC.**
Address: 42 Sampaguita Ave., Mapayapa Village, Br. V, Holy Spirit, Quezon City
TIN No.: 247-084-130-000 VAT Reg.
Tel. No.: (02) 931-5122

PR No.: 2018-11-354
PO No.: 2019-341
Date: 5/16/2019
Mode of Procurement: Small Value

Gentlemen:

Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery: <u>TARLAC STATE UNIVERSITY</u>		Delivery Term: <u>30 calendar days</u>			
Date of Delivery:		Payment Term: <u>n/30</u>			
Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
4	bottle	PHENANTHROLINE MONOHYDRATE, 1-10-, analytical grade, 25g. Provide MSDS of chemical. Shelf life should be at least 3 years or longer from date of purchase. For COD Analysis, Hi-media	2	4,125.00	8,250.00
15	bottle	POTASSIUM DICHROMATE, K ₂ Cr ₂ O ₇ , 500grams, Analytical grade. Provide MSDS of the chemical. Shelf life should be at least 3 years or longer from the date of purchase. For COD Analysis, O/S	1	2,508.00	2,508.00
30	bottle	SILVER NITRATE, AgNO ₃ analytical grade (100g). For preparation of titrant for chloride analysis, Provide MSDS of the chemical, Shelf life should be at least 3 years or longer from date of purchase, AR CHINA	2	12,800.00	25,600.00
					36,358.00

Purpose: Various Chemicals and Reagents (APP 2019- 1st Quarter) GAA - VPO

(Total Amount in Words) Thirty Six Thousand Three Hundred Fifty Eight Pesos Only

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.

COMMISSION ON AUDIT-TSU
RECEIVED

Very truly yours,

DR. GLENARD T. MADRAGA
VP, Admin. & Finance
Authorized Official

Conforme: ALAN S. AGUILANA 5030-19
By: [Signature] Date: 30 MAY 2019

MT. ZION SCIENTIFIC, INC.

(Signature over printed name & date)

Bank Account Name: MT. ZION SCIENTIFIC INC.
Bank Account Number: 06211198-18
Bank Name: LAND BANK
Bank Address: COMMONWEALTH QUEZON CITY

Funds Available:
[Signature]
JESUS S. DANGANAN
Budget Officer IV

ALOBS No.:
Amount:

ok
5/31/19



PURCHASE ORDER

DELIVERY DUE DATE: 6/29/19

Procurement Unit

Telefax No.: 045-982-4630

Supplier : **MT. ZION SCIENTIFIC, INC.**
 Address : 42 Sampaguita Ave., Mapayapa Village, Brgy. Holy Spirit, Quezon City
 TIN No. : 247-084-130-000 VAT Reg.
 Tel. No. : (02) 931-5122

PR No.: 2018-11-354
 PO No.: 2019-341
 Date: 5/16/2019
 Mode of Procurement: Small Value

Ger lemen:

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/30

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
14	bottle	PHENANTHROLINE MONOHYDRATE, 1-10-, analytical grade, 25g. Provide MSDS of chemical. Shelf life should be atleast 3 years or longer from date of purchase. For COD Analysis, Hi-media	2	4,125.00	8,250.00
15	bottle	POTASSIUM DICHROMATE, K2Cr2O7, 500grams, Analytical grade. Provide MSDS of the chemical. Shelf life should be atleast 3 years or longer from the date of purchase. For COD Analysis, O/S	1	2,508.00	2,508.00
30	bottle	SILVER NITRATE, AgNO3 analytical grade (100g), For preparation of titrant for chloride analysis, Provide MSDS of the chemical, Shelf life should be at least 3 years or longer from date of purchase, AR CHINA ***** <i>Purpose: Various Chemicals and Reagents (APP 2019- 1st Quarter) GAA - UNP</i>	2	12,800.00	25,600.00
					36,358.00

(Total Amount in Words) Thirty Six Thousand Three Hundred Fifty Eight Pesos Only

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.

COMMISSION ON AUDIT
RECEIVED
 BY: [Signature] Date: 30 MAY 2019

Very truly yours,

DR. GLENARD T. MADRIAGA
 VP, Admin. & Finance
 Authorized Official [Signature]

Conforme:

MT. ZION SCIENTIFIC, INC.

(Signature over printed name & date)

Bank Account Name: _____

Bank Account Number: _____

Bank Name: _____

Bank Address: _____

Funds Available: _____

JESUS S. DANGANAN

Budget Officer IV

ALOBS No. :

Amount :

Effectivity Date : March 1, 2017

Page 1 of 1