



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE: 7/8/22

Supplier: **MHIKE SOLAR ENERGY SHOP**

Address: **Y & Y Building, Magsaysay, Alaminos City, Pangasinan**

Type of Business: **Merchandising Business**

TIN#: **739-967-759-000 Non-VAT**

Tel. No.: **0997-218-3119/0963-859-6672**

PR No.: **2022-04-092**

PO No.: **2022-261**

Date: **6/2/2022**

Mode of Procurement: **Small Value**

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
1	pcs	PHOTOVOLTAIC MODULE (PANEL), 150w Solar Panel VMP 18.20V IMP 8.25A VOC 22.30V ISC 9.03A Weight 11KG 1015 x 668 x 35mm	80	6,300.00	504,000.00
5	pcs	SCC PWM 50 A 12/24v max. PV input voltage 100VDC <i>Warranty: One year apply in factory defect. Mishandle, misused, modified by other installer and Natural Calamities is not included</i> <i>Purpose: to be used in fabrication of Integrated Solar Power Generator and Water Irrigation Pump (PHASE 3) (DA- 3 RFO funded project)</i>	4	4,200.00	16,800.00
					520,800.00

(Total Amount in Words) Five Hundred Twenty Thousand Eight 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,

DR. GRACE N. ROSETE
Vice President for Administration

Authorized Official
JUN 08 2022

Conformer

[Signature] / June 8, 2022

MHIKE SOLAR ENERGY SHOP

(Signature over printed name & date)

Bank Account Name: **Michael S. Andaya / Mhike Solar Energy Shop**

Bank Account Number: **1291-1994-10**

Bank Name: **LANDBANK**

Bank Address: **MARCOS AVE. ALAMINOS CITY, PANGASINAN**



Funds Available:

[Signature]
JASPER A. YAUDER, CPA
Budget Officer

ALOPS No. :
Amount :



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Vice President for Administration

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Conforme:

MHIKE SOLAR ENERGY SHOP

(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.:

Amount:

No.: TSU-PRO-SF-09

Revision No. 3

Effectivity Date : August 24, 2020

Page 1 of 1