



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE: 8/5/2022

Supplier : **COPYLANDIA OFFICE SYSTEMS CORPORATION**
 Address : **252 AB Fernandez Ave., Dagupan City**
 Type of Business : **Merchandising**
 TIN No. : **002-332-000-021 VAT Reg.**
 Tel. No. : **075-5153306 / Fax: 075-5223267 / 0917-6527393**

PR No.: **2022-06-149**
 PO No.: **2022-292**
 Date: **6/28/2022**
 Mode of Procurement: **Direct Contracting**

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/30**

| Item No. | Unit | Description | Quantity | Unit Cost | Total Cost |
|----------------------------------|------|--|----------|-----------|------------------|
| 1 | pc | FIXING DRIVE GEAR, A03U-8084-00 | 1 | 918.00 | 918.00 |
| 2 | pc | FUSING GEAR, 38T A50U-7527-00 | 1 | 1,724.00 | 1,724.00 |
| 3 | pc | DRIVE GEAR UPPER, 38T A50U-7250-01 | 1 | 647.00 | 647.00 |
| 4 | pc | DRIVE GEAR FRONT, 38T A50U-7398-11 | 1 | 736.00 | 736.00 |
| 5 | pcs | CHARGING CORONA UNIT, A50U-R703-00 | 4 | 2,246.00 | 8,984.00 |
| 6 | pc | FUSING BELT, +1070 A50U-7650-00 Photo Sensing, A50U-M501-00 | 1 | 29,045.00 | 29,045.00 |
| 7 | pcs | PHOTO SENSING, A50U-M501-00 | 2 | 2,273.00 | 4,546.00 |
| 8 | pc | FUSING ROLLER, lw A50U-7655-00A | 1 | 9,554.00 | 9,554.00 |
| 9 | pcs | INSULATING SLEEVE, A50U-7563-00A | 2 | 1,133.00 | 2,266.00 |
| Purpose: for office use | | | | | 58,420.00 |

(Total Amount in Words) Fifty Eight Thousand Four Hundred Twenty 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

Conforme:

[Signature] 07/06/22
VERICA S. FIARNO

COPYLANDIA OFFICE SYSTEMS CORPORATION

(Signature over printed name & date)

Bank Account Name: **COPYLANDIA OFFICE SYSTEMS CORP.**
 Bank Account Number: **0051426452**
 Bank Name: **LBP**
 Bank Address: **MAKATI CITY**

COMMISSION ON AUDIT - TSU
RECEIVED
 By: _____ Date: **JUL 06 2022**

Funds Available:

[Signature]
IASPER A. YAUDER, CPA
 Budget Officer

ALOBS No. : **12-207512-2022-06-0099**
 Amount : **₱ 58,420.-**



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Very truly yours,


DR. GRACE N. ROSETE
 Vice President for Administration
 Authorized Official

Conforme:

COPYLANDIA OFFICE SYSTEMS CORPORATION

(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. : 02-207512-2077-01-0049
 Amount : ₱58,420 -