



PURCHASE ORDER

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

DELIVERY DUE DATE: 13 MAR 2025

Supplier: **STARLAB MEDICAL AND SCIENTIFIC APPARATUS SUPPLY**

Address: Zone 031, 930-A Rizal Ave., Santa Cruz, Manila

Type of Business: Merchandising

TIN No.: 115-735-600-000 VAT Reg.

Tel. No.: 0999-190-1521 / 0917-102-6207 / (046) 471-8707

PR No.: 2024-11-459

PO No.: 2025-056

Date: 1/24/2025

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
3	bottle	POTATO DEXTROSE AGAR, Powder, Titan, 500g	2	4,950.00	9,900.00
4	piece	CRYOVIALS, 5ml, Plastic	100	20.00	2,000.00
8	bottle	ETHANOL, (70%), 500ml	1	170.00	170.00
16	piece	HAND LENS	3	320.00	960.00
					13,030.00

Purpose: To conduct the study titled "DNA Barcoding and Phylogenetic Analysis of Different Macrofungi from Mt. Damas, San Clemente, Tarlac, Philippines, based on ITSrDNA. Lead Author: Geraldine G. Villanueva

(Total Amount in Words) Thirteen Thousand Thirty 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:

Emily M. Caballa - 02/11/25

STARLAB MEDICAL AND SCIENTIFIC APPARATUS SUPPLY

(Signature over printed name & date)

Bank Account Name: Starlab Medical And scientific Apparatus Supply

Bank Account Number: 1168 - 0201 - 8671

Bank Name: China Bank

Bank Address: SM Bacoor Cavite



Funds Available:

JASPER A. VAUDER, CPA
Budget Officer

ALOBS No.: 02-106441-1023-02-0495

Amount: 13030



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STARLAB MEDICAL AND SCIENTIFIC APPARATUS SUPPLY

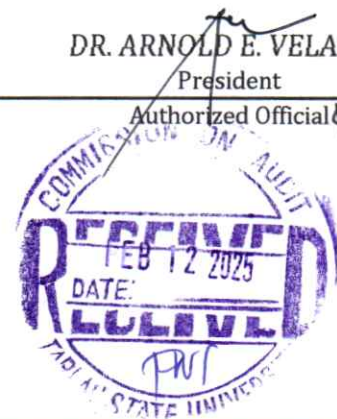
(Signature over printed name & date)

Bank Account Name: _____

Bank Account Number: _____

Bank Name: _____

Bank Address: _____



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