



# PURCHASE ORDER

**DELIVERY DUE DATE:** 21 JUL 2024

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

|   |   |
|---|---|
| Supplier : <b>NEW LA SUERTE HARDWARE CORP.</b>          | PR No.: <del>2024-04-188</del> <b>2024-05-197</b> |
| Address : <u>F. Tañedo, St., Poblacion, Tarlac City</u> | PO No.: <b>2024-415</b>                           |
| Type of Business : <u>Merchandising</u>                 | Date: <b>06/07/2024</b>                           |
| TIN No. : <u>203-807-986-000 VAT Reg.</u>               | Mode of Procurement: <u>Small Value</u>           |
| Tel. No. : <u>(045) 982-2766</u>                        |   |

Gentlemen:

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

|   |  |
|---|--|
| Place of Delivery: <b>TARLAC STATE UNIVERSITY</b> | Delivery Term: <u>30 calendar days</u> |
| Date of Delivery:                                 | Payment Term: <u>n/15</u>              |

| Item No. | Unit | Description   | Quantity | Unit Cost | Total Cost              |
|----------|------|---|----------|-----------|-------------------------|
| 1        | assy | <b>Main MCCB 100AT/100AF, Schneider, 2Pole, 230V</b><br>Branches: 4-20AT MCB, 2Pole, 230V<br>5-30AT MCB, 2Pole, 230V, 3Spare<br>With Busbar, grounding busbar, deadfront, and accessories in NEMA-1 Enclosure.<br>*****<br><i>Purpose: Replace the damaged panel board at CCS Bldg. ground floor San Isidro Campus.</i> | 1        | 25,500.00 | <b><u>25,500.00</u></b> |

(Total Amount in Words) Twenty Five Thousand Six Hundred Ten 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

Conforme: *lwh 6-21/24*



Very truly yours,

DR. ARNOLD E. VELASCO  
President  
Authorized Official *[Signature]*

**NEW LA SUERTE HARDWARE CORP.**

(Signature over printed name & date)

Bank Account Name: \_\_\_\_\_  
 Bank Account Number: \_\_\_\_\_  
 Bank Name: \_\_\_\_\_  
 Bank Address: \_\_\_\_\_

Funds Available:

*[Signature]*  
**JASPER A. YAUDER, CPA**  
 Budget Officer

ALOBS No. : *02-20644-2024-06-1982*  
 Amount : *₱25,500*