



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE: 22 AUG 2024

Supplier : **LUCKY 2 NON-SPECIALIZED WHOLESALE TRADING**
 Address : Atlanta St. Niñas Ville, Brgy. Suizo, Tarlac City
 Type of Business: Merchandising Business
 TIN#: 482-667-684-000 Non-VAT
 Tel. No. : 0969-475-2805 / 0932-221-0201

PR No.: 2024-01-008
 PO No.: 2024-491
 Date: 8/1/2024
 Mode of Procurement: Shopping

Gentlemen:

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

Place of Delivery: **TARLAC STATE UNIVERSITY**

Delivery Term: 20 Calendar days

Date of Delivery:

Payment Term: n/15

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	pack	BATTERY, LR44 Alkaline Button Cell Battery (pack of 10)	1	500.00	500.00
2	pack	BATTERY, 9V alkaline Battery (pack of 2)	2	800.00	1,600.00
3	piece	BATTERY, CR2016 BP2 Lithium Coin Battery 3V, Battery Type: Li-ion, Nominal Capacity: 90mah, Size: 20*1.6mm	25	150.00	3,750.00
4	pack	BATTERY, Lithium Alkaline Battery; 2pcs LR1130, Micro Alkaline Battery, 2 pcs per pack	25	60.00	1,500.00
5	pack	BATTERY, LR44; Cell Type: Button cell, Nominal Voltage: (V) 1.5, Nominal Capacity: (mAh)* 138, Nominal Discharge Current: (mA) 0.2, Operating Temperature Range: (deg. C)**-20 to +85 (approx); pack of 10	6	200.00	1,200.00
6	pack	BATTERY, Rechargeable, AAA, NiMH 800mAh 1.2v, (pack of 4)	2	1,600.00	3,200.00
7	pack	BATTERY, Size C, 2 pcs/pack ***** Purpose: APP 1st Quarter 2024	5	200.00	1,000.00
					<u>12,750.00</u>

(Total Amount in Words) Twelve Thousand Seven Hundred Fifty 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,

[Signature] 8-2-24
 DR. ARNOLD E. VELASCO
 President

Authorized Official

Conforme:

[Signature] 08-02-24

LUCKY 2 NON-SPECIALIZED WHOLESALE TRADING

(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-MWMT-2024-At 253 of
 Amount : (2,750.00)