



# PURCHASE ORDER

Procurement Unit

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

**DELIVERY DUE DATE:**

8/18/23

Supplier : **BNO MEDLAB TRADING**  
 Address : L4 B2 St. Anthony St., St. Dominic Corinthian Subd.,  
 Dolores San Fernando Pampanga  
 Type of Business : Merchandising  
 TIN No. : 235-610-075-000 Non-VAT  
 Tel. No. : 0947-393-8957

PR No.: 2023-05-215  
 PO No.: 2023-321  
 Date: 07/12/2023  
 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              |
|--|-----------|---|----------|-----------|-------------------------|
| 43   | tube      | OINTMENT, Mupirocin, Mupiderm, Exp. Date not less than 1yr            | 5        | 85.00     | 425.00                  |
| 47   | tube      | OINTMENT, Sodium Fusidate, Fucidin, Exp. Date not less than 1 1/2 yr  | 5        | 178.00    | 890.00                  |
| 54   | bottle(s) | SPRAY, Cool Spray, Pau, 100ml   | 30       | 286.00    | 8,580.00                |
| 55   | vial      | STERILE WATER, for injection, 50ml, solvent, Parenteral Prep, Euromed | 5        | 29.00     | 145.00                  |
| *****<br>Purpose: Various Medicines for Medical Services Unit use (PPMP 3rd quarter) |           |   |          |           | <b><u>10,040.00</u></b> |

(Total Amount in Words) Ten Thousand Forty 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]*  
 Manifesto Locomana 7/19

### **BNO MEDLAB 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.: 02-102101- 2023-07-0378  
 Amount: ₱ 10,040