



# PURCHASE ORDER

Procurement Unit

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

**DELIVERY DUE DATE:** 9/3/23

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

Address: Justinville Subd. 1, Blk. 1 Lot 7 Caimito Road Extn., Bacoor, Cavite

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.: 2023-06-227

PO No.: 2023-341

Date: 7/28/2023

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**

Date of Delivery:

Delivery Term: 30 calendar days

Payment Term: n/15

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
8	bottle	<b>BRILLIANT GREEN LACTOSE BILE BROTH, 500 grams, hi media</b> ***** <i>Purpose: for the conduct of the study "Development of Saresa (Muntigia Calabura)- Flavoured Ketchup" Dr. Robert V. Marcos as the lead author</i>	1	6,400.00	<u>6,400.00</u>

(Total in Words) Six Thousand Four Hundred 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,

AUG 03 2023

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

Conforme:

*Manansala*  
Emily L. Manansala 08/04/2023

**STARLAB MEDICAL AND SCIENTIFIC APPARATUS SUPPLY** SUPPLY

(Signature over printed name & date)

Bank Account Name: Starlab Medical and Scientific Apparatus Supply

Bank Account Number: 1421-1166-24

Bank Name: landbank

Bank Address: Imus Cavite

*Leonora G. Caballero*  
**RECEIVED**  
AUG 16 2023

Funds Available:

*Jasper A. Yauder*  
**JASPER A. YAUDER, CPA**  
Budget Officer

ALOBS No.: 12-102101-2023-05-0462  
Amount: P6400-





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

AUG 03 2023

Conforme:

**STARLAB MEDICAL AND SCIENTIFIC APPARATUS SUUPLY** SUPPLY

(Signature over printed name & date)

Bank Account Name: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

COMMISSION ON AUDIT - TSU  
**RECEIVED**  
 BY: Date: AUG 04 2023

Funds Available:

**JASPER A. YAUDER, CPA**  
 Budget Officer

ALOBS No.: 12-102101-2023-05-0462  
 Amount: P6400-