



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE: Pick-up/cod

Supplier : **WILCON DEPOT, INC.**
 Address : McArthur Highway, San Rafael, Tarlac City
 Type of Business : Merchandising
 TIN No. : 000-102-878-00011 VAT reg.
 Tel. No. : 0919-075-8283

PR No.: 2023-07-265
 PO No.: 2023-339
 Date: 07/27/2023
 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: Pick-up

Date of Delivery:

Payment Term: COD

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	set	WATER CLOSET, 1 set - 039600002939 - KOHLER/WC-OVE; K45759VN-5-0 2.6/4L 2PC TOILET W/ SOFT CLOSE S; 1 pc - 039600002938 - KOHLER/BOWL; 17736VN-M-0 OVE 2.6/4L DF 2PC TOILET BOWL; 1 pc - 039600002880 - KOHLER/TANK W/CVR&FITTINGS 45678VN-0 OVE 2.6/4L 1 pc - 039600002881 - KOHLER/ACC SEAT&COVER 17660X-M-0 OVE EL QUIET ***** <i>Purpose: Replacement of damage toilet fixture at the President Office</i>	1	26,688.00	<u>26,688.00</u>

(Total Amount in Words) Twenty Six Thousand Six Hundred Eighty Eight 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]* 7/27/23

WILCON DEPOT, INC.

(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. :
Amount :