WORK ORDER

Procurement Unit
Tel No.: 045-606-8110 local 157/142

DELIVERY DUE DATE: 03 JUL 2025

Supplier :	HIGH VISION BUILDERS CORPORATION	Work Order No.:	2025-105
Address :	6th St. Sitio L.I. Binauganan, Tarlac City	Date :	05/27/2025
TIN :	604-920-205-00000 VAT Reg.	JO No. :	2025-076
Tel. No. :	0968-702-7282 / 0947-768-2043	Date :	04/10/2025
		Mode of Procurement:	NP - Small Value Procurement (SVP)
		Mode of Payment:	N/15

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within **Thirty (30)** calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QTY.	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
1	lot	***LABOR AND MATERIALS:* FABRICATION AND INSTALLATION OF SLIDING GLASS DOOR** Fabrication and Installation of 2 sets Sliding Glass Door at the Deans Office, COS Building Lucinda Campus 1 set - 2.10M x 1.80M White powder coated 1-3/4" x 4" Aluminum Frame: Sliding Door with 6MM THK. Clear tempered glass with frosted tint : and Complete with *Accessories* 1 set - 2.10M x 1.80M White powder coated 1-3/4" x 4" Aluminum Frame: Sliding Door with 6MM THK. Clear tempered glass complete accessories **	45,000.00	**45,000.00**

COMMISSION ON AUDIT
RECEIVED
DATE: JUN 03 2025
TARLAC STATE UNIVERSITY

(Please read carefully at the back hereof)

Charge to: 02-206441
ROA No.: 2025-05-1543
CONFORME & RECEIVE COPY :

06/3/25
HIGH VISION BUILDERS CORPORATION
Firm/Dealer/Supplier/Contractor

Date
Bank Account Name: ____________________
Bank Account Number: ____________________
Bank Name: ____________________
Bank Address: ____________________

FUNDS AVAILABLE:

JASPER A. YAUDER, CPA
Budget Officer

APPROVED:

DR. ARNOLD E. VELASCO
President
Authorized Official

WORK ORDER

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Tel No.: 045-606-8110 local 157/142

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COMMISSION ON AUDIT RECEIVED DATE: JUN 0 3 2025 TARLAC STATE UNIVERSITY

(Please read carefully at the back hereof)

Charge to: 02-206441
ROA No.: 2025-037543
CONFORME & RECEIVE COPY :

FUNDS AVAILABLE:

JASPER A. YAUDER, CPA
Budget Officer

HIGH VISION BUILDERS CORPORATION
Firm/Dealer/Supplier/Contractor

Date

Bank Account Name: ____________________
Bank Account Number: ____________________
Bank Name: ____________________
Bank Address: ____________________

APPROVED:

DR. ARNOLD E. VELASCO
President
Authorized Official