



PURCHASE ORDER

DELIVERY DUE DATE: 4/10/19

Procurement Unit
Telefax No.: 045-982-4630

Supplier: **AZITSOROG, INC.**
Address: 103 Gloria St. Corner Ortigas Avenue Extension
Marick Subdivision, Cainta Rizal
TIN No.: 215-398-290-000 VAT Reg.
Tel. No.: 09771862598

PR No.: 2019-02-042
PO No.: 2019-123
Date: 3/7/2019
Mode of Procurement: Direct Contracting

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/30

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
10	roll	LAMINATION HOLOGRAM, 1200 counts/roll, 1200 cards/roll	7	12,980.00	90,860.00
11	roll	RETRANSFER FILM, high-definition, 1000 counts per roll one sided, 500 cards/roll	10	4,975.00	49,750.00
12	set	RIBBON, for EDI secure printer XID 8300 with RFID cards. YMCK high definition ribbon, 1000 prints per roll; RFID contactless EM or Smart card; XID high definition coated cards standard size CR802.126 x 3:37 x 8mm; 1,000 RFID cards	10	40,000.00	400,000.00
					540,610.00

Purpose: For BASO use

(Total Amount in Words) Five Hundred Forty Thousand Six Hundred Ten Pesos Only
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.

COMMISSION ON AUDIT - TSM
RECEIVED
By: [Signature] Date: MAR 12 2019

Very truly yours,
[Signature]
DR. GLENARD T. MADRIAGA
VP, Admin. & Finance
Authorized Official
[Signature]

Conforme:
[Signature]
3/11/2019

AZITSOROG, INC.
(Signature over printed name & date)
Bank Account Name: AZITSOROG INCORPORATED
Bank Account Number: 10900003926
Bank Name: BANCO DE ORO
Bank Address: FRANMONT MEGALAND A.C.

Funds Available:
[Signature]
JESUS S. DANGANAN
Budget Officer IV

ALOBS No.: _____
Amount: _____
Effectivity Date: March 1, 2019 Page 1 of 1

ok posted
3/12/19



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[Signature]
DR. GLENARD T. MADRIAGA
 VP, Admin. & Finance
 Authorized Official
[Signature]
 3/14/19

Conforme:

AZITSOROG, INC.

(Signature over printed name & date)

Bank Account Name: _____
 Bank Account Number: _____
 Bank Name: _____
 Bank Address: _____

Funds Available: <i>[Signature]</i> JESUS S. DANGANAN Budget Officer IV	ALOBS No. : Amount :
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