



PURCHASE ORDER

Procurement Unit

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

DELIVERY DUE DATE: 21 JUL 2024

Supplier : **BELMAN LABORATORIES**
 Address : Belman Building, #78 Cordillera St., cor. Quezon Ave., Brgy. Doña Josefa, Quezon City
 Type of Business : Merchandising
 TIN No. : 000-391-662-000 VAT Reg.
 Tel. No. : 0917-190-4444 / (02) 8712-0201

PR No.: 2024-02-087
 PO No.: 2024-299
 Date: 5/9/2024
 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: 60 calendar days

Date of Delivery:

Payment Term: n/15

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
10	pair	AUTOCLAVABLE PETRI PLATES , Dish Petri w/cover 15x100mm, Borosil	20	110.00	2,200.00
12	piece	AUTOCLAVABLE BEAKER , Beaker Low Form w/spout 100ml, Borosil	10	63.00	630.00
16	piece	AUTOCLAVABLE WIDE MOUTH REAGENT BOTTLE , Bottle Lab (reagent) w/screw cap & pour ring 1L, Borosil	30	548.00	16,440.00
					19,270.00

 Purpose: Phase 1: Isolation and characterization of bacterial endohyptes from mahogany (Swietenia macrophylla King) trees in Tarlac State University Lucinda Campus. Phase 2: Bacterial endohyptes isolated from mahogany (Swietenia macrophylla King) trees in Tarlac State University - Lucindu Campus as bioinoculant for corn (Zea mays) Lead Author: Angelica Tabamo

(Total Amount in Words) Nineteen Thousand Two Hundred Seventy 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. ARNOLD E. VELASCO
President

Conformed:  5/22/24
CARREN LUGTUHAN
 TECHNICAL SALES REPRESENTATIVE

Authorized Official

BELMAN LABORATORIES

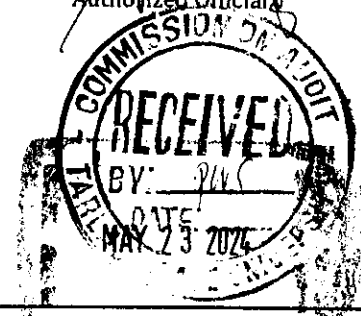
(Signature over printed name & date)

Bank Account Name: _____

Bank Account Number: _____

Bank Name: _____

Bank Address: _____



Funds Available:


JASPER A. YAUDER, CPA
 Budget Officer

ALOBS No. : 02-102101-2024-03-0348
 Amount: 19,270

