



# PURCHASE ORDER

Procurement Unit  
Telefax No.: 045-982-4630

**DELIVERY DUE DATE: 21 OCT 2024**

Supplier : **HERMANA PHARMACY**  
Address : Hospital Drive, San Vicente, Tarlac City  
Type of Business : Merchandising  
TIN No. : 446-613-036-000  
Tel. No. : 0915-063-0518

PR No.: 2024-08-324  
PO No.: 2024-600  
Date: 09/26/2024  
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**  
Date of Delivery:  
Delivery Term: 20 calendar days  
Payment Term: n/15

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	tank	<b>MEDICAL OXYGEN TANK, (Refill) Standard, 15lbs</b> ***** <i>Purpose: for MSO medicine supply</i>	5	550.00	<b><u>2,750.00</u></b>

(Total Amount in Words) Two Thousand Seven Hundred Fifty 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  
27 SEP 2024  
Authorized Official

Conforme:   
10/1/24

**HERMANA PHARMACY**

(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. : 01-206441-2024-09-3081  
Amount : ₱ 2750-