



# PURCHASE ORDER

Procurement Unit

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

**DELIVERY DUE DATE:** Pick-up / COD

Supplier : **DUCKTEN CORPORATION**  
 Address : **#704 Pablo Ocampo Sr. Street, Malate, Manila**  
 Type of Business : **Merchandising**  
 TIN No. : **008-960-152-003 VAT REG.**  
 Tcl. No. : **0949-663-8687 / (02) 8244-6514**

PR No.: **2024-02-069**  
 PO No.: **2024-280**  
 Date: **05/03/2024**  
 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: **Pick-up**

Date of Delivery:

Payment Term: **COD**

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
14	pair	<b>KARATE-DO</b> , blue foot gloves with shin guard, medium-2, large-2, XL-2	6	2,700.00	16,200.00
15	pair	<b>KARATE-DO</b> , blue mitts/gloves, medium-2, large-2, XL-1	5	1,600.00	8,000.00
17	piece	<b>KARATE-DO</b> , red foot gloves with shin guard, medium-3, large-2, XL-1	6	2,700.00	16,200.00
18	pair (s)	<b>KARATE-DO</b> , red mitts/gloves, medium-2, large-2, XL-1	5	1,600.00	8,000.00
19	piece (s)	<b>TAEKWONDO</b> , Kick Pad Seniors (double padded)	16	950.00	15,200.00
***** Purpose: Sports Supplies and Materials for Training 2024 - APP 1st Quarter 2024					<b>63,600.00</b>

(Total Amount in Words) Sixty-Three Thousand Six Hundred 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

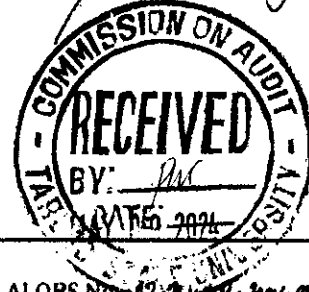
Very truly yours,

Conforme: *by: Patricia F. Ignacio*  
*Branch Manager*  
**DUCKTEN CORPORATION** *May 09, 2024*  
 (Signature over printed name & date)

DR. ARNOLD E. VELASCO  
President

Authorized Official

Bank Account Name: \_\_\_\_\_  
 Bank Account Number: \_\_\_\_\_  
 Bank Name: \_\_\_\_\_  
 Bank Address: \_\_\_\_\_



Funds Available:  
*JASPER A. YAUDER, CPA*

ALOBS No.: *19-2024-2024-05-14(2)*  
 Amount: *63,600.00*



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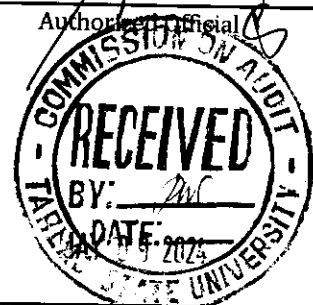
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Very truly yours,

**DR. ARNOLD E. VELASCO**  
 President

Authorized Official

Conforme:



### DUCKTEN CORPORATION

(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.: *02-100441-2024-05-1467*  
 Amount: *63,600.00*