



# PURCHASE ORDER

**DELIVERY DUE DATE: 14 DEC 2024**

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

Supplier : **GLISHER PHARMACY**  
Address : #1048 Supan Bldg., F. Tanedo St., Tarlac City  
Type of Business : Merchandising  
TIN No. : 328-948-372-000 Non-VAT  
Tel. No. : 0949-888-9958/0916-215-0830/0908-168-8806

PR No.: 2024-10-415  
PO No.: 2024-745  
Date: 11/22/2024  
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: 15 Calendar days  
Payment Term: n/15

Item No.	Unit	Description	Quantity	Unit Cost	Total Cost
1	piece	<b>SPLINT, SAM Splint Wrist, 9 inches</b> ***** <i>Purpose: Medicines - Medical Clinic Use.</i>	10	675.00	<b><u>6,750.00</u></b>

(Total Amount in Words) Six 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

Authorized Official

Conforme: *[Signature]* 11-29-24

**GLISHER PHARMACY**

(Signature over printed name & date)

Bank Account Name: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_



Funds Available:

*[Signature]*  
**JASPER A. YAUDER, CPA**  
Budget Officer

ALOBS No. : 02-206441-2024-11-39204  
Amount : ₱ 6,750.-