

MARIANO MARCOS STATE UNIVERSITY

City of Batac 2906 Ilocos Norte

MARIANO MARCOS STATE UNIVERSITY



WH879724

Supplier: GFK LABORATORY SUPPLIES SPECIALIST Address: Montalban, Rizal TIN: 184-853-768-000	P.O. No.: 07308603-2021-10-623 Date: October 08, 2021 Mode of Procurement: NP-Small Value
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Gentlemen:
Please furnish this Office the following articles subject to the terms and conditions contained herein:
PR No. 2021-07-134 (07308603) NICER 1 (N.Legaspi)

Place of Delivery: MMSU, City of Batac Date of Delivery: Within 60 calendar days upon receipt of P.O.	Delivery Term: FOB Destination Payment Term: N/30
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Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
LSE-087-906	btl	Hydrochloric acid, concentrated, reagent grade, 2.5L/btl, AR	1	4,000.00	4,000.00
LSE-087-916	pck	Disposable pipette tips, 20-200 uL, yellow, 1000 pcs/pack	1	450.00	450.00
MSL-100-022	bx	Face mask, 3-ply, earloop type, 50 pcs/box	10	79.00	790.00
LSE-087-923	pc	Wash bottle, 500mL capacity, needle spray, easy squeeze, polyethylene	2	250.00	500.00
LSE-087-787	pc	Mortar and pestle, 100D x 130 mL, porcelain	15	290.00	4,350.00
LSE-087-925	pc	Burette, glass, 50mL, China	1	1,500.00	1,500.00
LSE-087-551	pc	Test Tube Rack, wood, 12 capacity, local	1	460.00	460.00
LSE-087-928	set	Iron stand with adjustable clamp, 18 in height	1	1,900.00	1,900.00
				Total	13,950.00

(Total Amount in Words): **Thirteen Thousand Nine Hundred Fifty Pesos Only**

In case of failure to make the 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 on the undelivered item/s.

Conforme:

Rolando B. Buanaventura
Signature over Printed Name of Supplier

October 15, 2021

Date

Mariano Marcos State University
BY AUTHORITY OF THE PRESIDENT

Very truly yours,

Prima Ferr Franco
PRIMA FERR FRANCO
Vice President for Academic Affairs
SHIRLEY C. AGRUPIS
President

Fund Cluster :07308603 Funds Available : _____ IMELDA C. CORPUZ Chief, Accounting Office ✓	ORS/BURS No. : _____ Date of the ORS/BURS: _____ Amount : _____
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