



## PURCHASE REQUEST

Dept./Office: **CN**PR #: **STF-2021-07-00541**Date: **07-30-2021**Section/End-User: **Joel Rey U. Acob**Category: **Office Equipment**Funding Source: **Special Trust Fund**Project Title/Code: **College of Nursing Laboratory Fees**

Item #	Item Description	Unit	Qty	Unit Cost	PAR/ICS	Total Cost
1	<b>Air Condition Non-Inverter Window type 0.5HP, Standard size</b>	unit	1	14,500.00	JOEL REY U. ACOB	14,500.00
<b>Specification:</b> ?at most 600 Watts ?cooling capacity: at least 5000 Kilo joules per hour ?at least EER 10.0						
<b>TOTAL</b>						<b>14,500.00</b>
Purpose: For laboratory use						
Checked by: <div style="text-align: center;">   <b>NORMAN O. VILLAS</b>              TWS - Office Equipment           </div>				Funds Available: <div style="text-align: center;"> <b>MYRNA S. PANCITO</b>              HEAD, BUDGET OFFICE           </div>		
Signature: Printed Name: Designation:	Requested by: <div style="text-align: center;">   <b>JOEL REY U. ACOB</b>              END USER           </div>		Noted by: <div style="text-align: center;">   <b>JOEL REY U. ACOB</b>              UNIT HEAD, PROJECT LEADER           </div>		Approved by: <div style="text-align: center;"> <b>EDGARDO E. TULIN</b>              PRESIDENT, VSU           </div>	