

**PURCHASE ORDER**

Department of Social and Welfare and Development  
Field Office Region XIII CARAGA

Supplier Name: <b>SHACENE PENSION HOUSE AND RESTAURANT</b>	Purchase Order No.: <b>23-08-1265</b>
Address: <b>Mabua, Tandag City</b>	Date: <b>2023-08-07</b>
TIN:	Mode of Procurement: <b>NP Small Value Procurement</b>
PhilGEPS No.:	

**Gentlemen**  
Please furnish this office the following articles subject to the terms and conditions contained herein.

Place of Delivery: <b>Tandag City</b>	Delivery Term: <b>As Per Book Schedule After Receipt of Approved P.O.</b>
Date of Delivery:	Payment Term: <b>As Per Billing</b>

#	Unit	Description	Quantity	Unit Cost	Total Cost
1	PAX	1 meal and 2 Snacks Day 1 (2nd semester)	78.00	500.00	39,000.00
2	PAX	1 meal and 2 Snacks Day 2 (2nd semester)	78.00	500.00	39,000.00

COMMISSION ON AUDIT  
DSWD FO XIII  
OFFICE OF THE AUDITOR  
**RECEIVED**

DATE: 08/29/23 TIME: \_\_\_\_\_  
BY: [Signature]

"Catering Services: Surigao Del Sur Case Management Conference (2nd Semester)"

(Total Amount in Words) **SEVENTY-EIGHT THOUSAND PESOS ONLY** **TOTAL** **78,000.00**

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.

Conforme: [Signature] **DECIE JEAN L. URBIZONDO**  
Signature Over Printed Name of Supplier  
Date: 8-21-23

Very truly yours,  
[Signature] **MARI-FLOR A. DOLTAGA-LIBANG**  
Signature Over Printed Name of Authorized Official  
Regional Director  
Designation

Fund Cluster: <u>101</u>	DV No.: <u>23-08-1265</u> Date: _____
Fund Available: _____	ORS/BURS No.: <u>23-08-10170</u> Date: _____
<u>[Signature]</u> <b>GRETCHEN FERNANDEZ ESCALA</b> Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit	Source of Funds: <u>101</u>
	UACS Code: <u>507990900</u>
	Responsibility Center: <u>0001601-01-01-01</u>
	Amount: <u>78,000</u>

This agency adheres to "NO GIFT ALLOWED" policy pursuant to the provision of R.A 6713 known as the Code of Conduct and Ethical Standards for Public Official and Employees.

**DSWD-CARAGA**  
Capital Site, Butuan City  
Tel. No. (085) 3425619 local 101

**PROCUREMENT**

**RECEIVED**

Date: 8/29/23  
Time: 1:00pm  
By: [Signature]

Voucher/Payment you my text in the following PO [SPACE] PURCHASE ORDER NUMBER and send to 09560847559 \*\*