

PURCHASE ORDER

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

Name: KAWA RESORT MALINAO GENERAL LUNA, SURIGAO DEL NORTE 932-520-952-001	Purchase Order No.: 24-07-1035 Date: 2024-07-03 Mode of Procurement: NP Small Value Procurement
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Please furnish this office the following articles subject to the terms and conditions contained herein.

Delivery: General Luna, Surigao del Norte

Delivery: July 18, 2024; Aug. 26-27, 2024

Delivery Term: Within the day of the specified date of conduct

Payment Term: Within 30 working days after receipt of SOA and list of guest with billeting (if applicable)

#	Unit	Description	Quantity	Unit Cost	Total Cost
1	PAX	1 Meal with Billeting (Dinner) before the day - 1st Batch	18.00	1,500.00	27,000.00
2	PAX	1 Meal without billeting - 1st Batch	95.00	300.00	28,500.00
3	PAX	1 Meal with Billeting (Dinner) before the day - 2nd Batch	18.00	1,500.00	27,000.00
4	PAX	1 Meal without billeting - 2nd Batch	95.00	300.00	28,500.00
5	PAX	3 Meals and 2 Snacks with Billeting First day 2nd Batch	1.00	2,600.00	2,600.00
6	PAX	2 meals and 2 Snacks Second day - 2nd Batch	1.00	950.00	950.00

Menu: 2 main dish, 1 side dish, fruits, softdrinks, rice, 2 snacks

OFFICE OF THE REGIONAL DIRECTOR
RECEIVED

7/11/2024

CR

"Catering Services: SUPPLEMENTAL PROPOSAL RE: CARING FOR THE CAREERS 4.0: FOSTERING RESILIENCE AND PERSONAL DEVELOPMENT FOR CIS STAFF CUM: TEAM BUILDING"

Total Amount in Words)	ONE HUNDRED FOURTEEN THOUSAND FIVE HUNDRED FIFTY PESOS ONLY	TOTAL	114,550.00
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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.

Very truly yours,

Signature Over Printed Name of Supplier: **FATIMA CIANE B. TROZO**
Date: **7/11/2024**

Signature Over Printed Name of Authorized Official: **MARI-FLOR A. DOLAGA-LIBANG**
Designation: **Regional Director**

Cluster: **101**
Available: **101**

Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit: **GRETCHEN FERNANDEZ ESCALA**
Date: **7/11/2024**

DV No.: **24-07-1035** Date: **07/15/24**
ORS/BURS No.: **24-07-1035** Date: **07/15/24**
Source of Funds: **FI**
UACS Code: **500020000**
Responsibility Center: **00010-01-01-01-03**
Amount: **114,550.00**