

**PURCHASE ORDER**

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

24-08-1389

Supplier Name: <b>KAWA HILSORT</b>	Purchase Order No.: <b>24-08-1389</b>
Address: <b>MAJINAO GENERAL LUNA, SUBICAO DEL NORTE</b>	Date: <b>2024 08 22</b>
TIN: <b>932,520,952,001</b>	Mode of Procurement: <b>Lease of Real Property and Venue</b>
PhilGEPS No.:	

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

Place of Delivery: <b>Subicao del Norte</b>	Delivery Term: <b>Within the day of the specified date of conduct</b>
Date of Delivery: <b>Sept. 25-27, 2024</b>	Payment Term: <b>Within 30 working days after receipt of SOA and list of goods with billings (if applicable)</b>

#	Unit	Description	Quantity	Unit Cost	Total Cost
1	PAX	3 Meals and 2 Snacks with Billeting for 4 days PMB OFFICE AND FIELD OFFICES 4 DAYS	85.00	2,600.00	884,000.00
2	PAX	3 Meals and 2 Snacks with Billeting for 4 days RSPU STAFF 4 DAYS	25.00	2,600.00	260,000.00
Menu: 2 main dish, 1 side dish, dessert/fruits, softdrinks, rice, snacks with drinks					
<p>COMMISSION ON AUDIT DSWD FO XIII OFFICE OF THE AUDITOR RECEIVED</p> <p>9/3/2024</p> <p><i>[Signature]</i></p> <p>"Catering Services: 2024 YEAR END OLDER PERSONS PROGRAM IMPLEMENTATION REVIEW"</p>					
(Total Amount in Words) <b>ONE MILLION ONE HUNDRED FOURTY-FOUR THOUSAND PESOS ONLY</b>			<b>TOTAL</b>	<b>1,144,000.00</b>	

In case of failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of rate percent for every day of delay shall be imposed.

Conforme: *[Signature]* **FATIMA DIANE B. TRDZO**  
Signature Over Printed Name of Supplier  
Date: **9/3/2024**

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

Fund Center: **141**  
Fund Available: *[Signature]* **GRETCHEN FERNANDEZ ESCALA**  
Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit  
Date: **8/29**

PO No.: **24-08-1389** Date: **2024-08-22**  
ORS/BURS No.: **2408-1760** Date: **2024-08-22**  
Source of Funds: **101**  
UACS Code: **50701002**  
Responsibility Center: **05016-01-01-01-04-01**  
Amount: **1,144,000**

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.  
\*\* To track your Voucher/Payment you may text us the following PO [SPACE] PURCHASE ORDER NUMBER and send to 099560842555 \*\*