

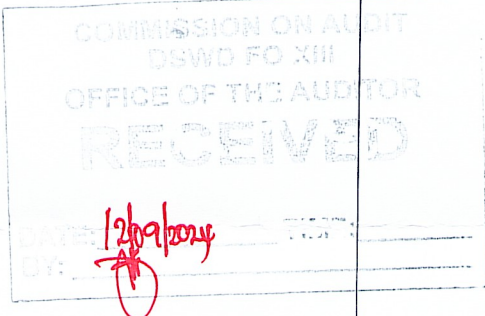
**PURCHASE ORDER**

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

Supplier Name: <b>MSC CENTER FOR THE POOR, INC. - BUTUAN</b>	Purchase Order No.: <b>24-12-2127</b>
Address: <b>1st St. Pareja Subd., Brgy. Bayanihan</b>	Date: <b>2024-12-06</b>
TIN: <b>010-109-444-000</b>	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>Butuan City</b>	Delivery Term: <b>Within the day of the specified date of conduct</b>
Date of Delivery: <b>December 11-13, 2024</b>	Payment Term: <b>Within 30 working days after receipt of SOA and list of guest with billeting (if applicable)</b>

#	Unit	Description	Quantity	Unit Cost	Total Cost
1	PAX	1 meal and 2 Snacks for 3 days  Menu: 2 main dish, 1 side dish, dessert/fruits, rice, softdrinks, snacks with drinks	60.00	700.00	126,000.00
					
		<b>"Catering Services: Mastering Accounting Fundamentals: A Comprehensive Refresher for Enhanced Team Efficiency"</b>			

(Total Amount in Words) **ONE HUNDRED TWENTY-SIX THOUSAND PESOS ONLY** **TOTAL 126,000.00**

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:

Very truly yours,

*Mary Rose S. Castro*  
Signature Over Printed Name of Supplier  
**Mary Rose S. Castro**  
Date: **12-09-24**

*Mari-Flor A. Doullaga-Libang*  
Signature Over Printed Name of Authorized Official  
**MARI- FLOR A. DOULLAGA- LIBANG**  
Regional Director  
Designation

Fund Cluster: **101**  
Fund Available: **101**  
*Gretchen Fernandez Escala*  
Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit  
**GRETCHEN FERNANDEZ ESCALA**

DV No.: **24-12-2127-0000** Date: \_\_\_\_\_  
ORS/BURS No.: **24-12-2127-0000** Date: **12/11/24**  
Source of Funds: **101**  
UACS Code: **5020251000**  
Responsibility Center: **00010-61-02-01**  
Amount: **126,000.00**

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