

PURCHASE ORDER

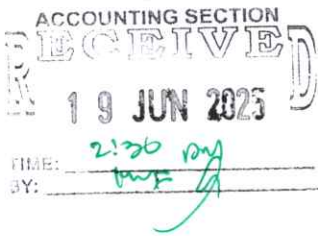
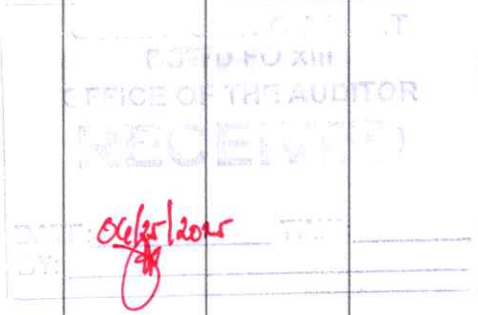
Department of Social and Welfare and Development
Field Office Region XIII CARAGA

Supplier Name: CHIKARA DOTTIES PLACE	Purchase Order No.: 25-06-0976
Address: Butuan City, Agusan del Norte	Date: 2025-06-10
TIN: 200-066-261-001	Mode of Procurement: Lease of Real Property and Venue
PhilGEPS No.: 107175	

Gentlemen

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

Place of Delivery: BUTUAN CITY	Delivery Term: Within the day of the specified date of conduct
Date of Delivery: JULY 7-9, 2025	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	2 Meals and 2 Snacks with Billeting DAY 1 (Lunch, Dinner, Snacks)	151.00	2,200.00	332,200.00
2	PAX	1 meal and 2 Snacks DAY 1 (Lunch, Snacks)	19.00	700.00	13,300.00
3	PAX	3 Meals and 2 Snacks with Billeting DAY 2 (BFast, Lunch, Dinner, Snacks)	151.00	2,500.00	377,500.00
4	PAX	1 meal and 2 Snacks DAY 2 (Lunch, Snacks)	19.00	700.00	13,300.00
5	PAX	2 meals and 2 Snacks DAY 3 (BFast, Lunch, Snacks)	151.00	1,000.00	151,000.00
6	PAX	1 meal and 2 Snacks DAY 3 (Lunch, Snacks)	19.00	700.00	13,300.00
2 Main Dish, 1 Side Dish, 1 Dessert, Rice and Softdrinks					
<div style="text-align: center;">   </div>					
"Catering Services: Sulong Dunong: Strengthening Skills - A Step Toward Personal and Entrepreneurial Growth for SLP Associations of Agusan del Norte (charged to CMF-Subsidies)"					

(Total Amount in Words)

NINE HUNDRED THOUSAND SIX HUNDRED PESOS ONLY

TOTAL

900,600.00

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:

CHIKARA DOTTIES PLACE
J.C Aquino Ave., Butuan City
0918-918-3888 / 0917-717-7999

Very truly yours,

For the Regional Director:

MARI-FLOR A. DOLLAGA- LIBANG

Signature Over Printed Name of Supplier

Date

TRISTAN C. TELEN, PhD. MA, REB
Director III / ARDA

Signature Over Printed Name of Authorized Official

Regional Director

Designation

Fund Cluster:

Fund Available:

DV No.:

ORS/BURS No.:

Source of Funds:

UACS Code:

Responsibility Center:

Amount:

Signature Over Printed Name of Chief Accountant/Head of Accounting Division/Unit

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