PURCHASE ORDER

DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT

		ibi koda, et	OHSTROHOLI HI	lls, Quezon Cit	У	spounts - W	- NI	
Supplier :		HIVE HOTEL & CONVENTION PLACE PO No. :			2018-03	-0150		
		out Tuazon cor. Scout Madrinian St. Brg gle, Quezon City	y. South Dat	Date :		March 9, 2018		
		5-79/0917-4228010		Mode of Procurement :				
TIN:		71-146-002		wiode of Procurement :		KC-NCDPP - Shopping		
Gentlem Pl		sh this office the following articles su		terms and con	ditions con	tained herein:		
Place of D		68 Scout Tuazon cor. Scout Madrir Brgy. South Triangle, Quezon City	nian St.	elivery Term:		tamed noron.		
Date of Delivery:		March 11- 17, 2018	Pa			(15) to Thirty (30) days upon final		
Stock / Property No.	Unit	Description	n waandad mar it si	15 XW 1814	Quantity	Unit Amount	Amount	
W Z	pax pax pax pax pax	Board and Lodging for the Conduct of Talakayan Writeshop cum First Roun Analysis Workshop Date: March 11-17, 2018 Room Accommodation: Triple/ Quad si Number of Participants: 36 (Live-in) Check-in Date and Time: March 11, 20 Check-out Date and Time: March 17, 2 Number of Participants: 9 (Live-in) Check In Date & Time: March 13, 2018 Check Out Date & Time: March 15, 201 Schedule of Serving: March 11, 2018: Lunch, PM Snacks, Di March 12, 2018: Breakfast, AM Snack, (36 pax) March 13, 2018: Breakfast & AM Snack Snacks and Dinner (45 Pax) March 14, 2018: Breakfast, AM Snacks Dinner (45 Pax) Page 1 of 3 pa	haring in sepa 18 2:00 pm 2018 12:00 nn , 2:00 PM 8, 12:00 NN nner (36 pax) Lunch, PM Sr ks (36 Pax), Lu , Lunch, PM S	nack, Dinner unch, PM	36 36 9 9	1,800.00 x 6 days 1800.00 x 2 days	388,8	
	rds)	Four Hundred Twenty One Thousa	and Two Hu	ndred Pesos	Only	P	421,2	
ln ca undeliv	ase of failu ered cost	ire to make the full delivery within the for every day of delay shall be impose	time specified.	ed in the deliv	ery terms a	bove, a penalty of c	ne percent	
The s	supplier/se	ervice provider is required to submit t	he billing sta	tement within	five (5) wo	rking days after the	conduct of	
		achelland achel		Sig	USEC. MÆ gnature over l eputy Natio	RIA LOURDES T. Printed Name of Authonal Program Direct LAHI CIDSS-NCDD Designation	orized Official or and OIC,	
Fund Clu	ıster:	001-310100-3-1		ORS/BURS	No.: AT	1-10115 INCODP-2013	8-03-00 101.	
Funds Av	vailable:	421.200		li .		5: 02-10115 PCDDP 421, 200		
	Sign	JUBIE LEAH MAE. S. COLES					*	

Head of Actounting Division/Unit





FIEARE & DEVELOPMENT

1723

		DEPARTMENT OF SOCIAL W IBP Road, Constitution	Hills, Quezon City	OTALLIA	H / - /		
	LUN/E		PO No. :		2018-03-0150		
upplier :	68 Scc	OL David Couth	Date :		March 9, 2018		
ddress:	Triang	le, Quezon City	Date .				
el. No. :		5-79/0917-4228010	Mode of Procurement :		KC-NCDPP - Shopping		
TIN:	006-8	71-146-002					
Gentleme	en:	WH	U - towns and con	ditions cont	ained herein:		
Ple	ase furnis	sh this office the following articles subject to	the terms and con	1			
Place of Delivery: 68 Scout Tuazon cor. Scout Madrinian St. Brgy. South Triangle, Quezon City			Delivery Term:) to Thirty (30) da	ys upon final	
Date of Delivery: March 11- 17, 2018			Payment Term:	nt Term: inspection and acceptance			
Stock / Property Unit		Description	Description		Unit Amount	Amount	
No.	m saint	March 15, 2018: Breakfast, AM Snacks (45 Pa Snacks and Dinner (36 Pax)		12 m			
		March 16, 2018: Breakfast, AM Snack, Lunch, (36 pax) March 17, 2018: Breakfast and AM Snacks (36 Type of Serving: Filipino Menu					
		Guided Buffet: Breakfast, Lunch and Dinner - (beef/pork/chicken, fish and vegetables), Rice (NO Pork, with Muslim and Seventh Day Adve	, Dessell, Cold Dilli	s (S			
		Inclusions:					
		Fully airconditioned room with television set a Fully airconditioned function room that can accepax Free use of whiteboards, eraser, extension was laptops and LCD Projector. Good quality sound system with microphone audio technician.	ccommodate the 45				
#	* ;	Complimentary of backdrop/ tarpaulin in t	he function room	_	27 EEL =	the set I have been	
(Tota	Amount in Four Hundred Twenty One Thousand Two Hundred Pesos				- 14	P 421,200.	
lr unde	case of f	failure to make the full delivery within the time ost for every day of delay shall be imposed.	e specified in the de	thin five (5)	working days afte	er the conduct of th	
TI activ	ne supplie vity.	er/service provider is required to submit the b			4		
С	onforme:	the state of the s	Very	truly yours, USEC.	MARIA LOURDE	S T. JARABE	
-	Signatu	Cullity Taxi At re over printed name of Supplier		Cianaturo O	ver Printed Name of ational Program E KALAHI CIDSS-N	Authorized Official Director and OIC,	
,		Mar 11 /2018 Date		Kn Kn	Designation	n Zititif	
			Opein	URS No.:	02-101151	NCODP-2012-03-001	
Fund	d Cluster:	t01-316100 - 3-1	ORS/BURS No.: 02-10115(NCODP-201 Date of the ORS/BURS: 02-101151CD0P-201 Amount 421, 200			5UCDDP-2018-05-00	
Fund	ds Availab	ole: 421, 200				0	
1		1 6 1	Alliou				

JUBIE LEAH MAE. S. COLES Signature over Printed Lame of Chief Accountant/
Head of Accounting Division/Unit







PURCHASE ORDER
DEPARTMENT OF SOCIAL WELFARE

		IBP Road, Constitu	t WELFARE & DEV	ELOPMENT ity	#3	23	
Address: 68 S Trial Tel. No.: 935-		E HOTEL & CONVENTION PLACE	PO No.:		2018-03-0150 March 9, 2018		
		cout Tuazon cor. Scout Madrinian St. Brgy. Son ngle, Quezon City	Date :				
		35-79/0917-4228010 871-146-002	Mode of Procure	Mode of Procurement :		KC-NCDPP - Shopping	
Gentleme Plea		ish this office the following articles subject	to the terms and cor	aditions con			
Place of De		68 Scout Tuazon cor. Scout Madrinian S Brgy. South Triangle, Quezon City	t. Delivery Term:		tanied herein:		
Date of Deli	ivery:	March 11- 17, 2018	Payment Term:	Fifteen (15) to Thirty (30) days up inspection and acceptance			
Property No.	Unit	Description		Quantity	Unit Amount	Amount	
(Total Amo	ount in	Complimentary room (1) for the secretariat Complimentary break-out rooms (1) Free flowing coffee/tea and candies during Free strong WIFI Connections Complimentary of pens and pads with regis Hotels should not be offering short term loowith motels and hotels should not be situated gambling establishment or casinos. XXXXXXXXXXXXXXXIIIIIIIIIIIIIIIIIIIII	session stration table dging associated ed across or beside				
Words) Four Hundred Twenty One Thousand Two In case of failure to make the full delivery within the time on		o Hundred Pesos (Only	P P	421,200.0		
The sup activity.	ed cost	for every day of delay shall be imposed. rvice provider is required to submit the billing	ng statement within	five (5) worl	ove, a penalty of	one percent (1% e conduct of the	
	Ra ature ove	printed name of Supplier 2018 Date	Sign	JSEC. MAR lature over Prouty Nationa	IA LOURDES T. inted Name of Author al Program Direct AHI CIDSS-NCDD Designation	orized Official or and OIC, P	
Fund Cluste Funds Avail	able:	JUBIE FEAH MAE. S. COLES ture over Printed Name of Chief Accountant/ Head of Accounting Division/Unit	ORS/BURS (Date of the (Amount			DP-2018-03-00121 P-2018-03-00121	

