

Y. G. ...

#323

PURCHASE ORDER

DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT

IBP Road, Constitution Hills, Quezon City

RUSH
 ORDER - 10 - 1015

Supplier :	HIVE HOTEL & CONVENTION PLACE	PO No. :	2018-03-0150
Address :	68 Scout Tuazon cor. Scout Madrinian St. Brgy. South Triangle, Quezon City	Date :	March 9, 2018
Tel. No. :	935-35-79/0917-4228010	Mode of Procurement :	KC-NCDPP - Shopping
TIN :	006-871-146-002		

Gentlemen: *MA*
 Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery:	68 Scout Tuazon cor. Scout Madrinian St. Brgy. South Triangle, Quezon City	Delivery Term:	
Date of Delivery:	March 11- 17, 2018	Payment Term:	Fifteen (15) to Thirty (30) days upon final inspection and acceptance

Stock / Property No.	Unit	Description	Quantity	Unit Amount	Amount
		Board and Lodging for the Conduct of the 2017 Regional Talakayan Writeshop cum First Round Outcome Survey Data Analysis Workshop Date: March 11-17, 2018 Room Accommodation: Triple/ Quad sharing in separate beds Number of Participants: 36 (Live-in) Check-in Date and Time : March 11, 2018 2:00 pm Check-out Date and Time : March 17, 2018 12:00 nn Number of Participants: 9 (Live-in) Check In Date & Time: March 13, 2018, 2:00 PM Check Out Date & Time: March 15, 2018, 12:00 NN Schedule of Serving: March 11, 2018: Lunch, PM Snacks, Dinner (36 pax) March 12, 2018: Breakfast, AM Snack, Lunch, PM Snack, Dinner (36 pax) March 13, 2018: Breakfast & AM Snacks (36 Pax), Lunch, PM Snacks and Dinner (45 Pax) March 14, 2018: Breakfast, AM Snacks, Lunch, PM Snacks and Dinner (45 Pax)	36 36 9 9	1,800.00 x 6 days 1800.00 x 2 days	388,80 32,40
		<i>Page 1 of 3 pages</i>			

w/ 2 OBRS

(Total Amount in Words)	Four Hundred Twenty One Thousand Two Hundred Pesos Only	P	421,20
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In case of failure to make the full delivery within the time specified in the delivery terms above, a penalty of one percent (1% undelivered cost for every day of delay shall be imposed.

The supplier/service provider is required to submit the billing statement within five (5) working days after the conduct of t activity.

Conforme:
Rachel ...
 Signature over printed name of Supplier
 Date: *Mar 11, 2018*

Very truly yours,
USEC. MARIA LOURDES T. JARABE
 Signature over Printed Name of Authorized Official
 Deputy National Program Director and OIC,
 KALAHI CIDSS-NCDDP
 Designation

Fund Cluster: *001-310100-3-1*
 Funds Available: *421,200*
[Signature]
JUBIE LEAH MAE. S. COLES
 Signature over Printed Name of Chief Accountant/
 Head of Accounting Division/Unit

ORS/BURS No.: *02-101151NCDDP-2018-03-00 126*
 Date of the ORS/BURS: *02-101151NCDDP-2018-03-00*
 Amount: *421,200*

PURCHASE ORDER
DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT
 IBP Road, Constitution Hills, Quezon City

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HIVE HOTEL
 68 Scout
 Triangle
 Quezon City

Supplier :	HIVE HOTEL & CONVENTION PLACE	PO No. :	2018-03-0150
Address :	68 Scout Tuazon cor. Scout Madrinian St. Brgy. South Triangle, Quezon City	Date :	March 9, 2018
Tel. No. :	935-35-79/0917-4228010	Mode of Procurement :	KC-NCDPP - Shopping
TIN :	006-871-146-002		

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Stock / Property No.	Unit	Description	Quantity	Unit Amount	Amount
		March 15, 2018: Breakfast, AM Snacks (45 Pax), Lunch, PM Snacks and Dinner (36 Pax) March 16, 2018: Breakfast, AM Snack, Lunch, PM Snack, Dinner (36 pax) March 17, 2018: Breakfast and AM Snacks (36 Pax) Type of Serving: Filipino Menu Guided Buffet: Breakfast, Lunch and Dinner - minimum of 3 viands (beef/pork/chicken, fish and vegetables), Rice, Dessert, Cold Drinks (NO Pork, with Muslim and Seventh Day Adventist participants) Inclusions: Fully airconditioned room with television set and complete toiletries Fully airconditioned function room that can accommodate the 45 pax Free use of whiteboards, eraser, extension wires and cords for laptops and LCD Projector. Good quality sound system with microphones 3 pcs with standby audio technician. Complimentary of backdrop/ tarpaulin in the function room Page 2 of 3 pages			


(Total Amount in Words) **Four Hundred Twenty One Thousand Two Hundred Pesos Only** P **421,200.00**

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Conforme:

 Signature over printed name of Supplier
 Mar 11, 2018
 Date

Very truly yours,

USEC. MARIA LOURDES T. JARABE
 Signature over Printed Name of Authorized Official
 Deputy National Program Director and OIC,
 KALAHI CIDSS-NCDDP
 Designation

Fund Cluster: 001-31000-3-1
 Funds Available: 421,200

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

ORS/BURS No.: 02-101151 NCDDP-2018-03-0012
 Date of the ORS/BURS: 02-101151 NCDDP-2018-03-0012
 Amount: 421,200

PURCHASE ORDER

DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT
IBP Road, Constitution Hills, Quezon City

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Supplier :	HIVE HOTEL & CONVENTION PLACE	PO No. :	2018-03-0150
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Tel. No. :	935-35-79/0917-4228010	Mode of Procurement :	KC-NCDPP - Shopping
TIN :	006-871-146-002		

Gentlemen:

VMA

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Date of Delivery:	March 11- 17, 2018	Payment Term:	Fifteen (15) to Thirty (30) days upon final inspection and acceptance

Stock / Property No.	Unit	Description	Quantity	Unit Amount	Amount
		Complimentary room (1) for the secretariat Complimentary break-out rooms (1) Free flowing coffee/tea and candies during session Free strong WIFI Connections Complimentary of pens and pads with registration table Hotels should not be offering short term lodging associated with motels and hotels should not be situated across or beside gambling establishment or casinos. <p style="text-align: center;">xxxxxxxxxxxxxxxxnothing followsxxxxxxxxxxxxxxxx</p>			
		AOQ No. : 18-0160 KC-Shopping Reference PR No: 2018020426			


Page 3 of 3 pages

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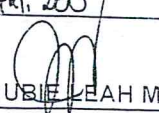
The supplier/service provider is required to submit the billing statement within five (5) working days after the conduct of the activity.

Conforme:


 Signature over printed name of Supplier
 Rachel
 Mar 11, 2018
 Date

Very truly yours,


USEC. MARIA LOURDES T. JARABE
 Signature over Printed Name of Authorized Official
 Deputy National Program Director and OIC,
 KALAHI CIDSS-NCDDP
 Designation

Fund Cluster: <u>001-510100-3-1</u> Funds Available: <u>421,200</u> <p style="text-align: center;"> JULIE LEAH MAE. S. COLES Signature over Printed Name of Chief Accountant/ Head of Accounting Division/Unit</p>	ORS/BURS No.: <u>02-101151NCDPP-2018-03-00126</u> Date of the ORS/BURS: <u>02-101151NCDPP-2018-03-00126</u> Amount: <u>421,200</u>
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