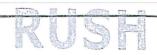
PURCHASE ORDER



DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT

IBP Road, Constitution Hills, Quezon City

#235

		Species at a second control of the second co			<u> </u>	7	
Supplier :	MELL	OW JAM CUISINE	PO No. :		2018-03-0156		
Address:	19 Jade St., Dona Juliana Village, Ortigas Ave. Ext. Rosario, Pasig City		Date :	Date :		March 13, 2018	
Tel. No. :	875-8	234/ 09257082770	Mode of Procurement :		NP-Small Value		
TIN:	108-6	60-068-000					
Gentlem		sh this office the following articles subject to	the terms and cons	litions con	tained herein:		
PI	ease turni		of the terms and conc	Intions con	tamed herem.		
Place of Delivery: P: DSWD - Centra CETICAL Formal Office of the Secre			Delivery Term:				
Date of De	elivery:	March 17, 2018	Payment Term:	Fifteen (15	to Thirty (30) da	iys upon offing obsumed	
Stock / Property No.	Unit	Description		Quantity	Unit Amount	Amount	
	lot	Packed Food for 2018 DSWD and Multi-Stak Advocacy Drive to End Violence Against Wo Solidarity Against VAW Caravan		1 1	29,362.50	29,362.50	
		Type of Serving :					
	pax	Packed AM Snack - Big Ensaymada with Sma Drink 350 ml	art C Bottled Juice	/150			
	pax	Packed Lunch - Roasted Chicken, Mixed Veg. Bottled Water	gies, Steam Rice and	150			
		Date of Delivery: 17 March 2018 at 8:00am					
		Venue DSWD Central Office - Office of the Se	cretary				
		Contact Person: Alecel Enano - 09189455350					
		xxxxxxxxxxxxnothing followsxx	xxxxxxxx				
		Reference No. 2018030558					
		AOQ No. 18-0183 NP- Small Value					
(Total Amount in Words) Twenty Nine Thousand Three Hundred S			Sixty Two and Fifty	Centavos	Only,	29,362.50	
ln c	case of fail	lure to make the full delivery within the time s delay shall be imposed on the undelivered it	specified above, a pe	enalty of or	ne-tenth (1/10) of	one percent (1%)	
		ervice provider)s required to submit the billi		five (5) wo	orking days after t	he conduct of the	
activit	ty.						
Con	nforme:		Very trul	y yours,	7.		
	Tork	THOSE CHINA	LISA MARIE CLEMENTE				
	Signature o	over printed name of Supplier	Signature over Printed Name of Authorized Official Head Executive Assistant				
_	700	/ Date 3/10/16		He	Designation	stant	
Fund C	luctor: /	1	ORS/BURS	S No : O ?		02-01992	
Fund Cluster: 648-100 000 -1-1 Funds Available: 29 3102.50			Date of the	Date of the ORS/BURS: 3-15-18			
	(JUBIE LEAHWAE. S. COLES	Amount			54L. 50	
	Si	gnature over Printed Name of Chief Accountant/	W				
		Head of Accounting Division/Unit	Γδ				

Head of Accounting Division/Unit