

| | | DEPARTMENT OF SOCIAL WELF IBP Road, Constitution Hill | | | | | | |
|--|---|--|--|--|---|-----------------------------------|--|--|
| Supplier : | | | PO No. : | | 2018-07-0787 | | | |
| Address: | Anglio | ngto Road, Damosa Gateway, Lanang, Davao City | Date: | | July 27, 2018 | | | |
| Tel. No. : | 082-2 | 33-2333 / 09177953548 (Ms. Grace Carillo) | Made of Dressessin | | | | | |
| TIN: | 000-0 | 74-418-003 | Mode of Procurement : NP - Lease of Venue | | | | | |
| Gentlem | | LO | | | | | | |
| *************************************** | | ish this office the following articles subject to the te | rms and conditions contai | ned herein | # * | | | |
| Place of A | ctivity: | Angliongto Road, Damosa Gateway, Lanang, Davao City | Delivery Term: | | | | | |
| Date of Ac | tivity: | July 30-August 3, 2018 | Payment Term: | Fifteen (15) to Thirty (30) days upon completion of supporting documents | | | | |
| Stock / Property , No. | Unit | Description (2.2) | | Quantity | Unit Amount | Amount | | |
| | pax pax pax pax pax pax | Title of the Activity: Board and Lodging for the con on Skills Enhancement Trainings for the Integration on Skills Enhancement Trainings for the Integration Organization in MCCT Pilot Areas Batch 1 Minimum Guaranted Pax: 25 participants Room Sharing: Maximum of Triple sharing (individual Check-In Date & Time: July 30, 2018 (2:00pm check-Check-Out Date & Time: August 3, 2018 (12:00pm check-Check-Out Date & Time: August 3, 2018 (Breakfast, Roman Check-Out Date & Time: August 3, 2018: Full Meal (Breakfast, AM Snack, Lunch July 31, 2018: Breakfast and AM Snack August 1 - 2, 2018: Full Meal (Breakfast, AM Snack, Lunch August 3, 2018: Breakfast and AM Snack Conference Room and Equipment: Free use of air-conditioned conference/function room total participants (1st day to last day) Should have no pillars that can block the view of partic Sound proof and well-ventilated; | n of Community It beds per pax) In time) out time) Id dinner; Plated for AM and nks. I, PM Snack, Dinner) Lunch, PM Snack, Dinner) | 29 28 1 28 28 | 1,750.00 (x 1 day) 1,750.00 (x 3 days) | 50,750.00 147,000.00 | | |
| ļ | <u></u> | page 1 of 2 | • | | | | | |
| | mount in ords) | | | | P | | | |
| In case of one ten per action | of failure to percent (0.0 cent (10%) and remedi | o make full delivery within the time specified above, the a 001) of the cost of the unperformed portion for every day of the amount of the contract, the Procuring Entity may rees available under the circumstances. | of delay. Once the cumulative escind or terminate the contri | amount of act, without | liquidated da prejudice to | mages reaches other courses of | | |
| The | supplier/se | rvice provider is required to submit the billing statement | within five (5) working days a | fter the con | duct of the a | ctivity. | | |
| Conf | forme: | flikani to | Very truly yours, | Very truly yours, | | | | |
| | Signature o | ver printed name of Supplier | LÉ Signature ou | | G. REYNOS | | | |
| 7/30/18 | | | Concurrent OfC, Of | Signature over Printed Name of Authorized Official U Concurrent OIC, Office of the Asst. Secretary for Promotive – OPG and Director, Pantawid Pamilyang Pilipino Program Management Office | | | | |
| | | Date | | | gnation 🗸 | | | |
| Fund Cluster: 3/1/80-1-1 Funds Available: 193, 3-0 r ODESSAT. VILLACERAN / Signature over Printed Name of Chief Accountant/ | | | ORS/BURS No.: Date of the ORS/BU Amount | Date of the ORS/BURS: 7-30-18 | | | | |
| | ······································ | OIC-Chief, Accountant -SPD | | | P. W. S. | | | |

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Date: 67/30/20/8

SEZI F081 (GH) 10/10/20 : 'ON

OBLIGATION REQUEST AND STATUS

| | | DEPARTMENT OF SOCIAL WELF IBP Road, Constitution Hil | FARE & DEVELOPMENT | | | | |
|-------------------------------------|--|--|--|--|-----------------------------------|------------------|--|
| Supplier: MICI | | ROTEL BY WYNDHAM (DAVAO) PO No. : | | , | 2018-07-0787 | | |
| Address: Angli | | ongto Road, Damosa Galeway, Lanang, Davao City | Date : | | | July 27, 2018 | |
| 9 | | 233-2333 / 09177953548 (Ms. Grace Carillo) | Mode of Procurement: | | King a second | | |
| TIN: 000-0 | | 074-418-003 Indice of Procurement : | | NP - Lease of Venue | | e or Venue | |
| Gentler | | nich this office the fellowing | | , | | | |
| | | nish this office the following articles subject to the terms | and conditions contained | herein: | | | |
| Place of Activity: | | Angliongto Road, Damosa Gateway, Lanang, Davao City | Delivery Term: | | | | |
| Date of Activity: | | July 30-August 3, 2018 | Payment Term: | Fifteen (15) to Thirty (30) days upon completion of supporting documents | | | |
| Property No. | Unit | Description | | Quantity | Unit Amount | Amount | |
| | | Free Welcome streamer; | | | | | |
| | | Free flowing coffee/tea/water with hot and cold water dispenser, no | uts candles during session | | | | |
| | | Must provide audio-visual equipment such as LCD projector, white sound system, at least three (3) microphones and audio jacks, end standy-by audio technician); | | | | | |
| | | Free writing pads, and pencils in all function room; Room Amenities: | | | | | |
| | | Free 1 secretariat room, Complimentary mineral bottled water replenished daily, tolletries, need arises. | and provision of first aid kit as | an anna ann an an an ann an an an an an | | | |
| | | Other Requirements: | | | | ÷ | |
| | | Adequate security (24/7) | | | | | |
| | | Note: o Hotel should not offer short -term lodging services, associated visituated beside or across gambling establishment shops, night du | with motels and should not be | | | | |
| | | other similar liks; o Hotel location should be appropriate for the conduct of profession productivity and creative thinking; | | | | | |
| | | Hotel can provide the required number of rooms and should not another hotel; | t transfer the participants to | | : | | |
| | • | o Service provider are strictly prohibited to deal any person involv changes/revision/addenda without prior consent/approval of the P Leonardo C. Reynoso, National Program Manager of Pantawid an Administrative Officer V of Administrative Support Division; | recurement Conseque | | | | |
| | | \circ The End-user will submit the CONFIRMATION SLIP of the total coractivity; | | _ | | | |
| | | o Charges will be made based on minimum guaranteed participants | | | | | |
| | · | References: AOQ No. 18-0933 NP-LV PR No. 2018-07-2 | 356 Fund Source: Cur | rent Appro 1 | 01 MOOE | | |
| (Total A | mount in | pege 2 of 2 - 7 | | | | | |
| | rds) | ONE HUNDRED NINETY SEVEN THOUSAND SEVEN | HUNDRED FIFTY PESOS | 3. | Р | 197,750.00 | |
| in case of of the co contract | of failure to est of the un , the Procur | make full delivery within the time specified above, the amount of the performed portion for every day of delay. Once the cumulative amou ing Entity may rescind or terminate the contract, without prejudice to | liquidated damages shall be at ant of liquidated damages reach to other courses of action and re | least equal to les ten percen amedies avail | one-tenth of one (10%) of the am- | percent (0.001) | |
| i | | ce provider is required to submit the billing statement within five (5) | | | | | |
| Confo | orme: / | Myon for | Very truly yours, | , | | | |
| | GRATO | E A. CAKILUO | , a.,, , tail, | MUEL | | | |
| Si | ignature ov | er printed name of Supplier | | | C. REYNOSC | | |
| | 7/30 | Date | Concurrent OIC, Of | fice of the Assi | | motive - OPG and | |
| Fund Clus | ster: | 2/0/10 - [-] | ORS/BURS No.: ¿ | Desi | gnation | J | |
| Funds Av | | 197. 750- | Date of the ORS/BUR | | | | |
| | | ODESSAT, VILLACERAN | Amount | | <u>+-'h0-1'</u> | 197,750.00 | |
| | · · · · · · · · · · · · · · · · · · · | Signature over Printed Name of Chief Accountant/ OIC-Chief, Accountant -SPD | ************************************** | | | | |