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			DEPARTMENT OF SOCIAL WELFARE IBP Road, Constitution Hills, Q		PMEN	T	井打	0	
Supplier :	lier: MELLOW JAM CUISINE			PO No.:			2018-08-0821		
Address :	Pasig City			Date :			August 3, 2018		
I EI INO .			32) 875-8234; 0925-7082770 / 0925-6014097 / 0925- 4 (Ms. Malou)	925- Mode of Procure		ment: NP-Smal		nall	Value
TIN: 108-66			0-068-0000						
Gentler P		rnish	this office the following articles subject to the term	s and conditi	ions co	ontained l	nerein:		
Place of A	Activity:		SWADCAP Facility, 3rd Avenue, Taguig	Delivery Te	erm:				
Date of Activity:			August 6-11, 2018	Payment T	Fifteen (15) to Thirty (ent Term: completion of suppor documents				
Stock / Property No.	Unit		Description			Quantity	Unit Amour	nt	Amount
	pax	party MM GG R V A A B B N Interest F S	cood for the Conduct of Logistics Management for LS artnership with Capacity Building Unit (CBU) type of Service: Guided Buffet leals: duided Buffet for Breakfast, Lunch & Dinner, Plated for Actice with 3 viands (fish, chicken, meat) and soup. degetable, fresh fruits/dessert and drinks laugust 6, 2018 dunch: 11:30am / PM Snack 2:30pm / Dinner 6:00pm laugust 7-10, 2018 dereakfast 6:30am / AM Snack 9:30am / Lunch: 11:30am Dinner 6:00pm laugust 11, 2018 dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions: dereakfast 6:30am / AM Snack 9:30am lote: Service Provider to submit menu lanclusions:	M & PM Snack 3 PM Snack 3	3:00pm	40 k	(Package Rate	e)	135,000.00
In one per (10%) of	cent (0.00 f the amo	ailure 1) of t unt of	to make full delivery within the time specified above, the amoughe cost of the unperformed portion for every day of delay. Once the contract, the Procuring Entity may rescind or terminate the cumstances.	nt of the liquida	e amoui	nt of liquida	ited damages i	ual to	nes ten percent
		er/serv	vice provider is required to submit the billing statement within						
Con:	LULIUS CALAMY printed name of Supplier	Signature over Printed Name of Authorized Official OIC-Director, Social Welfare Institutional Development Bureau							
Fund Cl Funds A		 :: _	35) 100-1-2 1135 007) -	Date		S No.: () DRS/BURS:			135,000.00

Signature over Printed Name of Chief Accountant/ Head of Accounting Division/Uni