PURCHASE ORDER

DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT

IBP Road, Constitution Hills, Quezon City

(ICON HOTEL (Timog)			PO No. :	PO No. :		2018-08-0840	
ress:	60 Ti	mog Ave. Cor. Tomas Morato, Quezon City	Date :	Date :		August 6, 2018	
Tel. No. :	0917	-254-98-66		na 1 6 D		ND Lagrant Vanua	
TIN: 008-409-427-000		Wode of Procure	Mode of Procurement :		NP-Lease of Venue		
Gentlem							
Ple	ease furni	ish this office the following articles subject		ditions con	tained herein:		
Place of Delivery: 60 Timog Ave. Cor. Tomas Morato, Quezo			Delivery Term:				
Date of Delivery:		August 7-9, 2018	Payment Term:	Payment Term: Fifteen (15) to Thirty (30) days upon completion of supporting documents			
Stock / Property No.	Unit	Description		Quantity	Unit Amount	Amount	
	pax	Board and Loding for the conduct of Mother Hearing on August 8, 2018 Date of Activity: August 7-9, 2018 Room accomodation requirements: August 7-9, 2018 - 16 rooms for triple sharing male participants) Number of Participants: Live In: 48pax Check-in Date/Time: August 7, 2018 - 2:00 p Check-in Date/Time: August 9, 2018 - 12:00 Food requirements: August 7, 2018 - will serve dinner August 8-9, 2018 - will serve breakfast Note: The Hotel should not be offering short to with motels and should not situated beside/accestablishment or casinos and other that may to sensitivities and not near funeral. **Example 10	r(individual beds for m nn erm lodging associated ross gambling ouch on cultural	48	1,000.00 x 2 days	96,000.00	
(Total Amount in Words)		Ninety Six Thousand Pesos Only			p	96,000.00	
equal to amount terminat	one-tenti of liquida te the con upplier/se	are to make full delivery within the time specific of one percent (0.001) of the cost of the united damages reaches ten percent (10%) of atract, without prejudice to other courses of rvice provider is required to submit the billing.	nperformed portion for the amount of the collaction and remedies	or every day ntract, the F available u five (5) work	r of delay. Once the concept of delay. Once the concept of the circumstance days after the concept of the conce	ne cumulative nay rescind or tances.	
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Signature over printed name of Supplier			Sig	Signature over Printed Name of Authorized Official			
Arey - Diral 8				Director, FMS On Designation			
Fund Clus	tor:		ORS/BURS	No 'M	7	100000	
Funds Ava	ailable:	JUBIE I FAH MAE. S. COLES ature over Printed Name of Chief Accountant/ Head of Accounting Division/Unit.		ORS/BURS:	111 <u>1 </u>		
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