PURCHASE ORDER

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

#892

Supplier	·: KG	BJ HOTEL & RESORT MANAGEMENT DRPORATION	PO No. :		2018-	08-0971	
Address:		Annapolis Street, Greenhills, San Juan	Date :	ate:		August 30, 2018	
Tel. No.	. No.: 744-7878 local 7162; 09065877200 (Mary Ann Datig)				August 50, 2016		
		6-899-591-000	Mode of Procureme	Mode of Procurement :		NP - Lease of Venue	
Gentle	men:	10					
	Please fu	rnish this office the following articles subject to th	e terms and conditions of	contained I			
Place of	Activity:	49 Annapolis Street, Greenhills, San Juan		Jonamean	ierein:		
		Amapons Street, Greennins, San Juan	Delivery Term:				
Date of A	Activity:	October 22-26, 2018	Payment Term:	Fifteen (15) to Thirty (30) days upon completion of supporting documents			
Property No.	Unit	Description		Quantity	Unit Amount	Amount	
		Provision of Hotel Accomodation for Lease of V	enue including meals				
	200	for the conduct of Training of Trainers on FDS-N	WIS, Batch 2		1,800.00	439,200.00	
	pax	Minimum Guaranted Pax: 55 participants		61			
		Room Sharing: maximum of Triple Sharing with in	ndividual beds per pax		(x 4 days)	,	
		Check-In Date & Time: October 22, 2018 (2:00pm	check-in time)			**	
		Check-Out Date & Time: October 26, 2018 (12:00nn c	check-out time)				
		menu Selection: Hotel to submit menu	,				
		Type of Serving: Guided buffet for breakfast, lunch AM and PM Snacks, minimum of 3 viands, with design of the state of the	and dinner; Plated for				
		Schedule of Serving:	sert and drinks.				
	pax	October 22, 2018: Lunch, PM Snacks and Dinner		0.4			
	pax	October 23-25, 2018: Breakfast, AM Snack, Lunch,	PM Spack Dinner	61			
	pax	October 26, 2018: Breakfast and AM Snack	Der 26, 2018: Breakfast and AM Speak				
		Conference Room and Equipment:		61			
		Must have strong and stable internet connection in t function);					
		Free use of air-conditioned conference/function roor the total participants (1st day to last day)					
		Should have no pillars that can block the view of participants:					
		Sound proof and well-ventilated;					
		Free Welcome streamer;					
		Free flowing coffee/tea/water with hot and cold water during session;	r dispenser, nuts candies		Committee of the commit		
(Total A	mount in	page 1 of 2	+				
	rds)	194			Р		
(10%) of	the amount	nake full delivery within the time specified above, the amount e cost of the unperformed portion for every day of delay. Onco of the contract, the Procuring Entity may rescind or terminate ander the circumstances.	t of the liquidated damages she the cumulative amount of lic	all be at leas	t equal to one	tenth of one ten percent	
remedies	available u	inder the circumstances.	e the contract, without prejudi	ice to other c	ourses of action	on and	
		ce provider is required to submit the billing statement within	five (5) working days after the	conduct of t	he activity.		
Confo	orme:	1/2/	Very truly you	irs,	Mulde		
	Beethi	te 13 Ban Wood	DIR.	FRNEST	NA Z. SOLL	080	
51	gnature ov	er printed paine of Supplier	Signature ov	er Printed N	ame of Autho	rized Official A	
	500	+ 13 2010			Program Manag	V/	
	30/3	7 13, 2018 Date	Water the second second	SO No. 3	130, S2018		
und Clus	ster.			Desig	gnation		
unds Av		10000010000 <u>4000</u>	ORS/BURS No.	02 109	113-101	9-09-110	
	enable.	# 434,200 -	Date of the ORS/	BURS:	0-7-1	0	
-		W. JUSTE LEAH MARS COLES	Amount		7-1-1	2	
	J	Signature over Printed Name of Chief Accountant/				T. C.	
		Late - t trief accountage Con \ &Cit-				P	

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		DEPARTMENT OF SOCIAL VI	WELFARE & DEVELOP	WENT	48	12
ISupplier .		HOTEL & RESORT MANAGEMENT	PO No.:		2018-08-0971	
Address :	49 Ann	napolis Street, Greenhills, San Juan	Date :		August 30, 2018	
Tel. No. :		99-591-000 (Mary Ann Datig)	Mode of Procurement		: NP - Lease	
Gentler		1				
Р	Please furnis	sh this office the following articles subject to	o the terms and conditio	ns containe	ed herein:	
Place of A	Activity:	49 Annapolis Street, Greenhills, San Juan	Delivery Term:		я –	
Date of Activity:		October 22-26, 2018	Payment Term:	Fifteen (15) to Thirty (30) days upon completion of supporting documents		
Stock / Property No.	Unit	Description		Quantity	Unit Amount	Amount
		Must provide audio-visual equipmeth such as L Whiteboards, markers and erasers with good so wireless microphones and audio jacks, enough standy-by audio technician) Free writing pads, and pencils in all function roow with Secretariat's Table and Chairs in function Room Amenities: Free 1 secretariat room	ound system, at least 3 extension cords (with om;			an se mili i v militade
		Complimentary mineral bottled water replenished provision of first aid kit as need arises Note: Adequate security (24/7) Hotel should not offer short -term lodging services and should not be situated beside or across gamblinight club, funeral parlor, morturies and other similated Hotel location should be appropriate for the concidiscussion and conducive for productivity and created Hotel can provide the required number of rooms participants to another hotel; Service provider are strictly prohibited to deal an activity for any changes/revision/addenda without performent Service/Dir. Leonardo C. Reynoso, N. Pantawid and Michael J. Mercado, Administrative C. Support Division; Note: The End-user will submit the CONFIRMATIC confirmed total pax shall be considered as the minimot exceeding the total target.	es, associated with motels ing establishment shops, ar ilks; duct of professional tive thinking; and should not transfer the by person involved in the prior consent/approval of the ational Program Manager of Officer V of Administrative ON SLIP, the indicated imum guaranteed pax but			
1 01 200	Refere	nces: AOQ No. 18-1107 NP-LV PR No. 2018	8-07-2430 Fund Sc	ource: CY 20	18 DFAT SARO 50	2
In case percent (10%) of	(0.001) of the f the amount of	page 2 of 2 FOUR HUNDRED THIRTY NINE THOUSA ake full delivery within the time specified above, the a cost of the unperformed portion for every day of delay of the contract, the Procuring Entity may rescind or ter	mount of the liquidated dama	iges shall be a	d damages reache	ne-tenth of one
-		nder the circumstances. e provider is required to submit the billing statement	within five (5) working days a	fter the condu	ict of the activity.	
Conf	forme:	or printed nake of Supplier	Very truly you	R. ERNES over Printed OIC - Nation	TINA Z. SOLL d Name of Author al Program Manage 5. 3130, S2018	9 ()
		Date			signation	Ų .
Fund Clunds A	vailable:	2000 100004000 P139, 200 + WILLIAM FAH MAE S. COLAS ature over Printed Nahle of Chief Accountant-SPD OIC-Chief, Accountant-SPD	ORS/BURS No. Date of the ORS/ Amount	0	41 <u>(3 - 7018</u> <u>9-7-18</u> ———	-109-111143 439,200.00