

PURCHASE ORDER

Department of Social Welfare and Development
Field Office VII

cor. MJ Cuenco Ave. & Gen. Maxilom Ave., Cebu City Tel. # 2330261, 2338785 Fax # 4129908, 2321192

Supplier: BOHOL PLAZA RESORT AND RESTAURANT	PO No. DSWD7-18-682
Address: Mayabac, Dauis, Bohol	Date: 10/25/2018
Contact No.: 0916-414-2355	Mode of Procurement: Lease of Venue
Contact Person: Ma. Geve O. Kapirig	TIN: 004-998-099-000

Gentlemen:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery:	Panglao Island, Bohol	Delivery Term:	Upon actual date of activity
Date of Delivery:	November 19-23, 2018	Payment Term:	within 30 calendar days after activity complete & receipt of final billing.

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
		Provision of board and lodging, catering services and venue for the below mentioned activity			
		Title of Activity			
		Workshop on the Management of SLP and other DSWD/Special Programs Assets			
		Availability:			
		Workshop on the Management of SLP and other DSWD/Special Programs Assets			
	pax	November 19-23, 2018	59	1,500.00	354,000.00
		Full Board with Breakfast as the first provision and dinner as the last provision		5%	15,803.57
		Schedule of Meals to be served		2%	6,321.43
		November 19, 2018: PM Snack and Dinner		Total after tax	331,875.00
		November 20-22, 2018: Full Meals with 2 sets of snack			
		November 23, 2018: Breakfast, A.M, Snack and Lunch			
		Location:			
		• Panglao Island, Bohol			
		Neighborhood Data			
		• The venue must not offer short-term lodging services and not adjacent to casinos, night clubs, bar shows and funeral facilities.			
		Amenities			
		Conference Room			
		Use of 1 Function Room (7AM-9PM as the maximum) that can accommodate the indicated number of pax.			
		No middle obstructing post/object with wide space for workshop activities. Conference room must have soundproof wall. No changing of assigned function room during the duration of the activity.			
		<i>(Pls. specify name of function or function number in the "statement of compliance" column.)</i>			
		AARON HALL			
		Room Requirement			
		Twin or triple sharing (sharing bed per participant) and 2 VIP Rooms (1 pax per VIP room) with separate beds for each pax.			

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
		<p>Provision of Backdrop and Welcome streamers/Lobby posting. Transportation for the secretariat from airport/seaport to the venue in bringing supplies and equipment's in the 1st and last day. There has to be enough number of stand-by waiters to assist the participants. There has to be on call medical personnel. At least have available over the counter medicine as need arises.</p> <p>There must be a free vehicle to ferry the participants from the airport/seaport to the venue on the first day and from venue to airport/seaport on the last day.</p> <p>Venue must be a smoke free zone in compliance to RA9211 (Tobacco Regulation Act of 2003)</p> <p>Purpose: Workshop on the Management of SLP and other DSWD/Special Programs Assets (Ref: PR No.: DSWD7-18-0918)</p>			
(Total Amount in Words)		Three hundred thirty one thousand eight hundred seventy five pesos only		Nett of tax	331,875.00
<p>In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed.</p>					
<p>Conforme:</p>		<p><i>[Signature]</i> <u>Ma. Gene O. Kopirig</u> Signature over Printed Name of Supplier</p> <p><u>11/2/18</u> Date</p>	<p>Very truly yours,</p> <p><i>[Signature]</i> <u>MA. EVELYN B. MACAPOBRE, CESO III</u> Director IV <i>sh</i></p>		
<p>Funds Available:</p> <p><i>[Signature]</i> <u>LOUIE RAY G. VILLARIN, CPA</u> Regional Accountant <i>MA Mark</i></p>			<p>ALOBS No. : _____</p> <p>Amount : _____</p>		

AO 6/15/02
PO No. DSWD7-18-644