

**PURCHASE ORDER**

Department of Social Welfare and Development  
Field Office VII, Cebu City

Supplier: **QUANTUM DLUX TOUR SERVICES**

PO No. DSWD7-2020-AMP-455

Address: Jose Romero Street, Bagacay, Dumaguete, Negros Oriental

Date: 07/31/2020

Contact No.: 0917-841-6684

Mode of Procurement: NP-Emergency Cases

Contact Person: Roland Don Ramos

TIN: 281-674-814-002

Gentlemen:

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

Place of Delivery:		Negros Oriental South and North		Delivery Term:		Upon Actual Date of Activity	
Date of Delivery:				Payment Term:		within 30 calendar days after receipt of billing	
Stock No	Unit	Description	Quantity	Unit Cost	Amount		
	unit	<b>PROVISION OF VAN RENTAL SERVICES</b> (2 units for Negros Oriental - South and North Bound)  <b>Specifications:</b> * 2 units of van vehicle in good running condition * can accommodate of at least 10 pax in comfortable & normal sitting capacity * fully air-conditioned and well-maintained * vehicle year model must be 2015 and above * to pick-up and drop-off passengers/staff from identified/designated pick-up and drop-off points * rental services to include licensed professional driver, fuel/lubricant & disinfectant/sanitizer * rental services must be up to 14 hours per day for 3 days * service from designated/identified pick-up and drop-off points of Negros Oriental North/South bound destination/area (at least up to Tanjay, Negros Oriental) to/from DSWD SWAD-Negros Office, Dumaguete City, Negros Oriental  <b>Purpose:</b> Van Rental services for DSWD Staff/SDO to/from SWAD-Negros/South and North bound, Negros Oriental in response to COVID-19 Pandemic  <b>End User:</b> PSD	2	8,500.00 x 2 vans x 3 days	<b>51,000.00</b>		
				<b>Gross Amount:</b>	<b>51,000.00</b>		
				3%	1,530.00		
				2%	1,020.00		
<b>(Total Amount in Words)</b>		<b>Forty Eight Thousand Four Hundred Fifty Pesos</b>		<b>Net of tax</b>		<b>48,450.00</b>	
<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: <u>ROLAND DON RAMOS</u> Signature over Printed Name of Supplier Date: <u>7/31/20</u></p>				<p>Very truly yours, <u>REBECCA P. GEAMALA</u> Regional Director</p>			
<p>Funds Available: <u>///</u></p> <p><b>LOUIE RAY C. VILLARIN, CPA</b> Regional Accountant</p>				<p>ALOBS No.: _____ Amount: _____</p>			

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