

**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: **DEPED- APPLIED NUTRITION**

PO No. DSWD7-2019-AMP-1009

Address: Banilad, Cebu City

Date: 10/28/2019

Contact No.: 416-0711

Mode of Procurement: Lease of Venue

Contact Person: Bryan Jay Pasco

TIN: 221-044-689-000

Gentlemen:

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

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
		<b>Provision of board and lodging, catering and venue for the below mentioned activity:</b>			
		<b>Title of Activity:</b>			
		<b>Consultation Dialogue with Foster Parents</b>			
		<b>Date of Activity:</b>			
	pax	December 12, 2019	50	1,575.00	78,750.00
	pax	December 13, 2019	50	1,575.00	78,750.00
		<b>(Live in Full board with venue rental)</b>			
		Meals and Snacks		Total before tax	<b>157,500.00</b>
		(Breakfast, AM Snacks, Lunch, PM Snacks, Dinner)			
		First Provision: Breakfast on December 12, 2019			
		Last Provision: Dinner on December 13, 2019			
		<b>Location:</b>			
		• Cebu City			
		<b>Neighborhood Data</b>			
		• Renting facility must not offer short-term lodging services (e.g. motels); must not be situated beside or across gambling establishments or casinos and others that may touch in cultural sensitivity like mortuaries or morgues and the like. Venue must be a smoke free zone in compliance to RA9211 (Tobacco Regulation Act of 2003)			
		<b>Amenities</b>			
		<b>a. Conference Room</b>			
		• Use of one (1) function room that can accommodate 70 pax with enough space for movement and buffet table; no middle obstructing post/object; with wide space, enough for structured learning activities such as workshop, gallery walk, small groupings, etc.			
		• (Pls. specify name of function or function number in the "statement of compliance" column.)-Conference No.4			
		<b>b. Space Requirements:</b>			
		• Table must be arranged classroom type to accommodate 2-3 persons each table; registration/working table for secretariat, small table near projector for Resource Person			
		<b>c. Light, Ventilation and Air-Conditioning</b>			
		• Proper Light, Ventilation and Air-Conditioning			
		<b>d. Audio Visual Requirements:</b>			
		• At least Two (2) wireless microphones and one (1) LCD projector for the function room			



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		<p><b>e. Room Requirements</b> 2 pax per room of assignment</p> <p><b>a. Other Requirements</b></p> <ul style="list-style-type: none"> <li>WIFI connection in the function room for the downloading, playing of presentation materials and videos required of the training, backdrop and welcome streamer/lobby posting; no electrical charge for the use of own equipment, whiteboard, extension cords, Philippine flag</li> <li>On call medical personnel in case of emergency and stand-by waiters. The venue is a smoke free zone in compliance to RA 9211.</li> </ul> <p><b>• Statement of Account must be released on the last day of the activity.</b></p> <p><b>Catering Services:</b></p> <ul style="list-style-type: none"> <li><b>Menu:</b> Breakfast, Lunch, Dinner, 2 snacks (AM/PM)</li> </ul> <p><b>Meals:</b></p> <ul style="list-style-type: none"> <li>Rice, Soup, 3 main dishes (vegetable, fish, chicken, pork and beef); dessert and natural juices</li> </ul> <p><b>Others:</b> No Serving of Creamdory and softdrinks.</p> <ul style="list-style-type: none"> <li>Flowing coffee/choco; Purified Drinking Water</li> </ul>			
		End User: <b>ARRS</b>			
		<b>PR Ref(DSWD7-19-1523)</b>			
(Total Amount in Words)	One hundred fifty seven thousand five hundred pesos				

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.

Net of tax **157,500.00**

Conforme: GAIL JASMIN E. GEMARDO  
Signature over Printed Name of Supplier  
Date: 12/04/19

Very truly yours,  
REBECCA P. GEAMALA  
Regional Director

Funds Available: LOUIE RAY C. VILLARIN, CPA  
Regional Accountant

ALOPS No. : \_\_\_\_\_  
Amount : \_\_\_\_\_

AO 6/15/02  
PO No. DSWD7-2019-AMP-1009

12/04/19