

PURCHASE ORDER

Department of Social Welfare and Development
Field Office VII

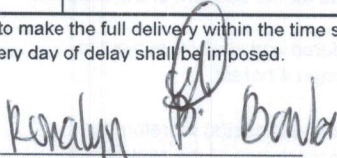

cor. MJ Cuenco Ave. & Gen. Maxilom Ave., Cebu City Tel. # 2330261, 2338785 Fax # 4129908, 2321192

Supplier: THE WELL HOTEL INC. Address: F. Ramos St. Cogon Ramos, Cebu City Contact No.: 09774528539/09425321887 Contact Person: Jeriz Mae A. Casquejo	PO No. DSWD7-2019-AMP-1033 Date: 10/24/2019 Mode of Procurement: Lease of Venue TIN: 425-710-409-000
---	---

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

Place of Delivery:	Cebu City	Delivery Term:	Upon actual date of activity
Date of Delivery:	Pls. see dates stated below	Payment Term:	within 30 calendar days after the activity & receipt of billing.

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
Provision of board and lodging, catering and venue for the below mentioned activity.					
Title of Activity Workshop on formulation of Policies, Systems and Procedures for Sama-Bajau Livelihood Association					
Availability: November 7-8, 2019 (Live in Full board with venue rental)					
	pax	Buffet Breakfast, Lunch, Dinner, Plated AM and PM Snacks	20	1,570.00	62,800.00
November 9, 2019 (Live-out with venue rental)					
	pax	Buffet Breakfast, Lunch, Dinner, Plated AM and PM Snacks	20	800.00	16,000.00
				total before tax	78,800.00
				5%	3,517.86
				2%	1,407.14
				Net Amount	73,875.00
Location: • Metro Cebu					
Neighborhood Data • 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)					
Amenities a. Conference Room • Use of (1) Function room (8am-6pm) that can accommodate the indicated number of pax with no middle obstructing post/object • (Pls. specify name of function or function number in the "statement of compliance" column.)-Topdeck Function room-9th Floor b. Space Requirements: • Classroom arrangement • Registration and working tables for secretariat with at least 4 chairs, small table near the projector for resource person with 1 chair. c. Light, Ventilation and Air-Conditioning • Proper Light, Ventilation and Air-Conditioning d. Audio Visual Requirements: • Complete and good sound systems with at least 3 microphones (with working batteries for wireless microphone) • Free use of 1 LCD projector w/ screen. • Free use of 1 laptop computer • On-call operator e. Room Requirements Triple accommodation for pax with separate beds					

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
		a. Other Requirements <ul style="list-style-type: none"> • Free even tarpaulin • Free WIFI/internet connection in the function room • No electrical charge for use of DSWD equipment • White board with pens and eraser • Extension cords at least 3 • Standby waiter • Philippine flag • Statement of Account must be released on the last day of the activity. Catering Services: <ul style="list-style-type: none"> • Meals: Rice, soup, 3 main dishes (choices of vegetables, fish not creamdory, chicken and pork/beef), dessert (assorted fruits in season) and natural fruit juice. • AM/PMSnacks: choices of pasta/batchoy/pastries/bihon and bottled natural fruit juice • Others: Flowing purified drinking water, coffee and candies <p style="text-align: center;">End user: STU (Ref: PR No.: DSWD7-19-1486)</p>			
(Total Net Amount in Words)		Seventy three thousand eight hundred seventy five pesos			73,875.00
<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>					
Conforme:		 Signature over Printed Name of Supplier	Very truly yours,	 REBECCA P. GEAMALA Regional Director	
		11/6/19 Date			
Funds Available:		LOUIE RAY C. VILLARIN, CPA Regional Accountant		ALOBS No. : _____ Amount : _____	

AO 6/15/02

PO No. DSWD7-2019-AMP-1033

