

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:	AZIA SUITES AND RESIDENCES	PO No.	DSWD7-2019-AMP-623
Address:	Rahman Ext. Cebu City	Date:	07/31/2019
Contact No.:	KC Lyn L. Salomon	Mode of Procurement:	Lease of Venue
Contact Person:	260-1111/0916-509-9761	TIN:	418-453-920-000
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 :			
		• Speakers Bureau Training Workshop			
		Availability:			
	pax	• August 13, 2019 (live-in fullboard with breakfast as first provision and dinner as last provision) Breakfast, Lunch, Dinner, AM and PM Snacks	31	1600.00	49,600.00
	pax	• August 13, 2019 (live-out) Breakfast, Lunch, Dinner, AM and PM Snacks	22	1050.00	23,100.00
	pax	• August 14, 2019 (live-out) Breakfast, Lunch, Dinner, AM and PM Snacks	53	1050.00	55,650.00
		Location:			
		• Cebu City			
		Neighborhood Data			
		• The 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 RA 9211.			
		Amenities			
		a. Conference Room:			
		• Use of one function room (9am-4pm as the maximum) that can accommodate the a minimum of 53 of pax with no middle obstructing post/object.			
		b. Space Requirements:			
		• Classroom setting. Provision of tables and chairs. Consider that activities are mostly workshops.			
		c. Audio Visual Requirements: 1 of 2			
				total before tax	128,350.00
				5%	5,729.91
				2%	2,291.96
				Gross Amount	120,328.13

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
		<p>Use of 1 LCD projector for presentation. Complete Audio Visual with at least 3 microphones. There has to be a standby operator to assist in the AV needs. Audio visual must be set up at least 1 hour before the activity. Available whiteboard, extension cords, and Philippine flag. No electrical charge for use of own equipment. Provision of backdrop.</p> <p>d. Room Requirements: Double or triple accommodation for pax with separate beds. With complimentary basic toiletries such as soap and shampoo. With free drinking water per request inside the room or with water per request inside the room or with water refill station accessible in the nearby rooms.</p> <p>Catering Services: breakfast, lunch, dinner and 2 snacks (AM & PM)</p> <ul style="list-style-type: none"> • Guided Buffet Breakfast: Rice, 3 main course (vegetable, fish, chicken, pork/beef), dessert (preferably fruits) and drinks (coffee or hot chocolate) • Buffet Lunch/Dinner: Rice, Soup, 3 main dishes (vegetable, fish not creamdory, chicken, pork/beef), dessert (preferably fruits) and natural juices • AM/PM Snacks: preferably native delicacies and natural juices. <p style="text-align: center;">(Ref: PR No.: DSWD7-19-1061)</p>			
(Total net amount in word)		One hundred twenty thousand three hundred twenty eight pesos and 13/100			120,328.13
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:</p> <p><i>RC VIN SALMON</i> Signature over Printed Name of Supplier</p> <p><u>8/8/19</u> Date</p>		<p style="text-align: right;">Very truly yours,</p> <p style="text-align: right;">REBECCA P. GEAMALA Regional Director For the Regional Director: <i>Shalaine Marie S. Lucero</i> SHALAIN MARIE S. LUCERO Director III / Asst. Regional Director for Operations</p>			
Funds Available:		<p><i>Louie Ray C. Villarain</i> LOUIE RAY C. VILLARIN, CPA Regional Accountant</p>	<p>ALOBS No. : _____ Amount : _____</p>		

AO 6/15/02

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