

**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:	<b>ALTA BOHOL GARDEN RESORT INC.</b>	PO No.	DSWD7-2019-AMP-843
Address:	San Isidro, Baclayon, Bohol	Date:	09/19/2019
Contact No.:	906-576-4054	Mode of Procurement:	Lease of venue
Contact Person:	Christine Malait	TIN:	464-138-210-000

Gentlemen:

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

Place of Delivery:	Bohol Province	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
		<b>Provision of board and lodging, catering and venue for the activity for the below mentioned activity</b>			
		Title of Activity			
		<b>Learning and Development Intervention for Stress Management for SLP Staff</b>			
		Availability:			
	pax	<b>September 24-26, 2019</b>	45	1,500.00	202,500.00
		Full Board: Breakfast as the first provision and dinner as the last			
	pax	<b>October 8-10, 2019</b>	46	1,500.00	207,000.00
		Full Board: Breakfast as the first provision and dinner as the last			
		<b>Location:</b>			
		• Within Tagbilaran City and Nearby Municipalities			
		<b>Neighborhood Data</b>			
		• The renting facility must not offer short-term lodging services (e.g. Motels); must not be situated across gambling establishment or casinos and others that may touch in cultural sensitivity like mortuaries or morgues and the like. The function has to be accessible by an elevator. Hotel must be a smoke-free zone in compliant to RA 9211 (Tobacco Regulation Act of 2003).			
		<b>Amenities</b>			
		<b>a. Conference Room</b>			
		• Use of one (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.			
		• (Pls. specify name of function or function number in the "statement of compliance" column.)-CPG/PANGLAO HALL			
		<b>b. Space Requirements:</b>			
		• Open Space Arrangement:			
		• Provision of 1 table for the registration/working table for secretariat and for the laptop/projector. With ample space for workshops or activities like group role playing and other structured learning activities. With elevated platform and lectern. Function room must not be elongated. Should have wide space or lawn for the outdoor activities.			
		<b>c. Audio Visual Requirements:</b>			
		• Availability of LCD projector (of each function room as needed) for presentation. Complete Audio Visual with at least 3 microphones (1 Wired Microphone and 2 Wireless Microphones) (per function room). There has to be on call operator to assist in the AV needs.			
				Total before tax	<b>409,500.00</b>
				5%	18,281.25
				2%	7,312.50
				Total after tax	<b>383,906.25</b>

Stock No.	Unit	Description	Quantity	Unit Cost	Amount
		<ul style="list-style-type: none"> <li>• Audio Visual must be set up at least 1 hour before the activity. Availability of whiteboard, extension cords, and Philippine Flag. No electrical charge for the use of own equipment.</li> <li>• Availability of WIFI connection in the function room for the downloading, playing of presentation materials and videos required of the training.</li> </ul> <p><b>d. Room Requirements:</b></p> <ul style="list-style-type: none"> <li>• Triple Sharing accommodation for pax with separate beds for each pax. Additional bed has to be in level with others and should not only be a mattress in the floor.</li> <li>• Separate room for the Resource Person. There has to be enough space to move within the room. With complimentary basic toiletries such as soap and shampoo.</li> <li>• With free drinking water per request inside the room or with water refill station accessible in the lobby to nearby rooms. Preferably equipped with functional television.</li> <li>• Room for the secretariat and Resource Persons must be with WIFI connection.</li> </ul> <p><b>e. Other Requirements:</b></p> <ul style="list-style-type: none"> <li>• Provision of Backdrop and Welcome streamers/Lobby posting. Transportation for the secretariat from port to the venue in bringing supplies and equipment's in the 1<sup>st</sup> and last day.</li> <li>• There has to be enough number of stand-by waiters to assist the participants. There has to be on call medical personnel.</li> <li>• At least have available over the counter medicine as need arises.</li> <li>• Venue must be a smoke free zone in compliance to RA9211 (Tobacco Regulation Act of 2003)</li> </ul> <p><b>Catering Services:</b>  <b>Menu: Buffet Breakfast, Lunch, Dinner and 2 snacks (AM &amp; PM)</b></p> <ul style="list-style-type: none"> <li>• <b>Buffet Breakfast:</b> Rice (preferably with local root crops), 3 main courses (choice of fish, beef, chicken, pork), 1 dessert (preferable fruits), drinks (coffee or hot chocolate)</li> <li>• <b>Buffet Lunch/Dinner:</b> Rice, Soup, 3 main dishes (vegetable, fish, chicken and pork/beef), dessert (preferably fruits) and natural juices</li> <li>• <b>AM/PM Snacks:</b> Variation of pasta, bread, native snacks and natural/local juice such as calamansi, buko, etc.</li> <li>• <b>Others:</b> Flowing Coffee/Purified Drinking Water</li> <li>• <b>No serving on cream dowry fish</b></li> <li>• No serving of pork for the whole duration of activity for participant with special dietary needs and with religious requirements (Seventh Day Adventist and Moslems)</li> </ul> <p style="text-align: center;"><b>(PR ref. DSWD7-19-1325)</b></p>			

(Total Amount in Words) **Three hundred eighty three thousand nine hundred six pesos and 25/100** Net of tax **383,906.25**

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.

Conforme:

*[Signature]*  
 Signature over Printed Name of Supplier  
 9/23/19  
 Date

Very truly yours,

*[Signature]*  
**SHALINE MARIE S. LUCERO**  
 Director III / Assistant Regional Director for Operations  
 9/19

Funds Available:

**LOUIE RAMON C. VILLARIN, CPA**  
 Regional Accountant

ALOBS No. : \_\_\_\_\_  
 Amount : \_\_\_\_\_