

PURCHASE ORDER					
Department of Social Welfare and Development Field Office VII, Cebu City					
Supplier: BOHOL TOURIST MULTI-PURPOSE COOPERATIVE			PO No. DSWD7-AMP-2022-025		
Address: 0130 ARBASTO BUILDING, POBLACION II, TAGBILARAN CITY			Date: 2/7/2022		
Contact No.: 0933-350-5790/0965-184-2154			Mode of Procurement: Small Value Procurement		
Contact Person: MARICAR M. TANGGAAN			TIN: 005-888-644-000		
Gentlemen, Please furnish this Office the following articles subject to the terms and conditions contained herein:					
Place of Delivery		WITHIN BOHOL PROVINCE		Delivery Term	
Date of Delivery				FEBRUARY 2022 TO DECEMBER 2022	
				Payment Term	
				within 30 calendar days after receipt of Billing/SVDR	
Stock No.	Unit	Description	Quantity	Unit Cost	Amount
	trip	VAN RENTAL SERVICES (BOHOL PROVINCE AREA) Specification: * Four-wheel drive, preferably * Fully air-conditioned * At least 14- person min. capacity (normal seating capacity) * Inclusion of fuel and lubricant * With licensed driver including his food & accommodation * Vehicle year model must be at least 2013 or above * Use of van depends on the set schedule of activity * 8 to 12 hours per day * Driver must be fully vaccinated with covid-19 Origin: * Tagbilaran City, Bohol Place to be visited: *Any point in Bohol Province Round Trip Purpose: To provide transportation of SLP staff for official functions during Spot check/ conduct of Technical Assistance to Different SLP staff / and Delivery of Assorted Office Supplies and Documents to different LGUs and conduct LAG implementation activities in the Province of Bohol for CY 2022. (Ref: PR No.: DSWD7-22-0074)	35	₱ 4,950.00	173,250.00
				1%	1,732.50
				2%	3,465.00
(Total Amount in Words)		One Hundred Sixty Eight Thousand Fifty Two Pesos & 50/100		Net of tax	168,052.50
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.					
Conformer Signature over Printed Name of Supplier			Very truly yours, REBECCA P. GEAMALA, DMPA Regional Director		
Date: _____			ALOBS No. _____ Amount: _____		
Funds Available LOUIE RAY C. VILLARIN, CPA Regional Accountant					

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