



Department of Social Welfare and Development

PURCHASE ORDERDepartment of Social Welfare and Development
Field Office VII, Cebu City

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| Supplier: MANHATTAN SUITES INN | PO No. DSWD7-AMP-2024-407 |
| Address: South Road, Calindagan, Dumaguete City | Date: May 27, 2024 |
| Contact No.: 0917-718-4816 | Mode of Procurement: NP-Lease of Venue |
| Contact Person: Ruth Sarah A. Lim | TIN: 283-587-761-0000 |

Gentlemen:

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

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|--------------------|---|----------------|---|
| Place of Delivery: | within Dumaguete City or Nearby Cities / Municipalities | Delivery Term: | Upon Actual Date of Activity |
| Date of Delivery: | Pls. see dates stated below | Payment Term: | within 30 calendar days after receipt of billing. |

| Stock No. | Unit | Description | Quantity | Unit Cost | Amount |
|-----------|------------|---|-----------|-----------------|------------------|
| | | Provision of Board and Lodging, Catering Services and Venue for the 2nd Semester Regional Independent Monitoring Council (RIMC) Meeting and Field Visit | | | |
| | | Dates: | | | |
| | pax | November 14, 2024 FULLBOARD: Breakfast, Lunch, Dinner, AM and PM snacks (Breakfast as the first provision and Dinner as last provision) | 20 | 2,500.00 | 50,000.00 |
| | pax | November 15, 2024 LIVEOUT: Breakfast, Lunch, AM and PM snacks (Breakfast as the first provision and PM snacks as last provision) | 20 | 800.00 | 16,000.00 |
| | | Details: should be served as assisted buffet | | | |
| | | 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. | | | |
| | | Amenities | | | |
| | | Requirements/inclusions | | | |
| | | Conference Room Requirement | | | |
| | | Use of one (1) Function Room " Elena 2 " (7AM- 11PM as the maximum) that can accommodate the number of pax indicated with no middle/side obstructing post/object with wide space for workshop activities. Venue must have a high ceiling. No change of assigned function room during the whole duration of the activity. | | | |

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| | <p>Space Requirements:</p> <p>U Shape arrangement. Provision of 1 table for the registration/working table for the 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</p> <p>WIFI Connection:</p> <p>Available of strong WIFI connection in the function room for the downloading, playing of presentation materials and videos required for the training. (to consult IT Team for the standard) -- at least 20 mbps for 50 pax; Inclusion of LAN Connection as back-up for training team.</p> <p>Lighting System</p> <p>Must have enough white light bulbs and not yellow/dim bulbs to ensure the good vision of participants for the entire session.</p> <p>Audio Visual Requirements:</p> <p>Use 2 LCD projector in good condition for presentation. Complete Functional Audio Visual (surround sound system) with at least 6 wireless microphones and 4 with wire. There has to be a standby operator to assist in the AV needs and the 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 our own equipment.</p> <p>Room requirement:</p> <p>Double sharing with separate beds for each pax that a distance of 1 to 2 meters between the beds is highly required. Preferably assigned rooms must be in the same floor of the function room or is accessible with an elevator for rooms located higher than 3rd floor in consideration with pax who may be Senior Citizen or PWD. There must be a free provision of bottled water and basic toiletries like soap & shampoo. The TV and cabinet must be readily available in each room with enough hangers. Room for the secretariat and Resource Persons must be with WIFI connection of at least 100mbps.</p> | | |
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| | <p>Other Requirements</p> <p>Provision of Backdrop or digital lobby posting. There has to be enough number of stand-by waiters to assist the participants. There has to be on call medical personnel and available over-the-counter medicines. Hotel must be a smoke-free zone in compliance with RA 9211 with a No Smoking Poster visible at the lobby or front desk. There should also be a No Human Trafficking Poster.</p> <p>Hotel must provide SOA, and Menu on the last day of the activity. Payment is within 30 days after receipt of the complete set of supporting documents.</p> | | | |
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| | <p>Catering Services: Buffet Meals and Snacks</p> <p>Breakfast: Rice, Soup, 2 main courses (choice of chicken, beef, fish), 1 dessert (preferably fruits), Drinks (coffee or hot chocolate)</p> <p>Lunch/Dinner: Appetizer, Rice, Soup, 3 main dishes (vegetable, pork, fish, chicken and beef)</p> <p>Dessert (choice of fresh fruits, fruit salad or pastries like cake) and natural juices</p> <p>AM/PM Snacks: Variations of pasta, bread, pastries, burgers, pizza, native snacks and natural/local juice (like Lemon grass, Calamansi, Buko, Watermelon or Cucumber, etc.)</p> <p>Unlimited supply of Coffee and Purified/mineral Drinking Water</p> <p>Strictly NO serving of cream dory fish, powder juice and soft drinks</p> <p>Purpose: Provision of Board and Lodging, Catering Services and Venue for the participants of the said activity</p> | | | |
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End User: Pantawid
 (Ref: PR No.: DSWD7-24-0520)

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|--------------------------------|---------------------------------|---------------------|------------------|
| (Total Amount in Words) | Sixty-Six Thousand Pesos | Gross Amount | 66,000.00 |
|--------------------------------|---------------------------------|---------------------|------------------|

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.

Very truly yours,

SHALAINÉ MARIE S. LUCERO, CESO IV
 Regional Director
 TL - OK

Conforme: _____
 Signature over Printed Name of Supplier

 Date

Funds Available: _____
PAOLO GILBERTO B. CAPUL, CPA
 Regional Accountant