

**PURCHASE ORDER**  
 DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT  
 IBP Road, Constitution Hills, Quezon City

Supplier :	THE LINDEN SUITES INC.	PO No. :	2018-08-0893
Address :	37 San Miguel Ave, Ortigas Center, Pasig	Date :	August 14, 2018
Tel. No. :	638-7878	Mode of Procurement :	NP- Lease of Venue
TIN :	005-035-641-000		

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

Place of Delivery:	37 San Miguel Ave, Ortigas Center, Pasig	Delivery Term:	
Date of Delivery:	August 22-24, 2018	Payment Term:	Fifteen (15) to Thirty (30) days upon completion of supporting documents

Stock / Property No.	Unit	Description	Quantity	Unit Amount	Amount
	pax	Board and Lodging for the conduct of Training-Workshop on Workload Analysis and Updating of TORs	70	1,790.00 x 2 nights	250,600.00
	pax		70		
		Date: August 22-24, 2018 Room Accommodation: 3 pax per room in seraprate beds Number of Participants: 70 (Live-in) Check In Date & Time: August 22, 2018, 2:00 PM Check Out Date & Time: August 24, 2018, 12:00 NN Schedule of Serving: August 22, 2018: Lunch, PM Snacks, Dinner August 23 : Full meal August 24, 2018: Breakfast, AM Snacks Type of Serving: Filipino Menu Plated : AM and PM Snacks (with cold beverage/drinks) Page 1 of 3 pages			

(Total Amount in Words) Two Hundred Fifty Thousand Six Hundred Pesos Only P 250,600.00

In case of failure to make full delivery within the time specified above, the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.

The supplier/service provider is required to submit the billing statement within five (5) working days after the conduct of the activity.

Conforme:

*Patricio Eveman*  
 Signature over printed name of Supplier  
 8/21/2018  
 Date

Very truly yours,  
  
 USEC. MARIA LOURDES T. JARABE  
 Signature over Printed Name of Authorized Official  
 Deputy National Program Director and OIC,  
 KALAHI CIDSS-NCDDP  
 Designation

Fund Cluster: 310100-3-1  
 Funds Available: 250,600-

ORS/BURS No.: 02-1015/NCDDP-2018-08-00634  
 Date of the ORS/BURS: 08/22/18  
 Amount: 250,600-

*Odessa T. Villaceran*  
 ODESSA T. VILLACERAN  
 Signature over Printed Name of Chief Accountant/  
 OIC Division Chief Acctg. Division for Special Projects, FMS

Supplier:



Sign  
OIC Division C

# PURCHASE ORDER

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Stock / Property No.	Unit	Description	Quantity	Unit Amount	Amount
		<p>Guided Buffet: Breakfast, Lunch and Dinner - minimum of 3 viands (beef/pork/chicken, fish and vegetables), Rice, Dessert, Cold Drinks (No Porks, with Muslim and Seventh Day Adventist participants, with special meal for Muslim and SDA participants).</p> <p><b>Inclusions:</b></p> <p>Fully air-conditioned bedrooms with television set and complete toiletries</p> <p>Fully air-conditioned function rooms that can accommodate 80 pax</p> <ul style="list-style-type: none"> <li>- Free use of whiteboards, eraser, extension wires and cords for laptops and LCD Projector</li> <li>- Good quality sound system with microphones with at least 3 pcs with standby audio technician.</li> </ul> <p>Complimentary of backdrop/ tarpaulin in the function room</p> <p>Free flowing coffee/tea and candies during session</p> <p>Free strong WIFI Connections</p> <p style="text-align: center;"><i>Page 2 of 3 pages</i></p>			

(Total Amount in Words)	Two Hundred Fifty Thousand Six Hundred Pesos Only	P	250,600.00
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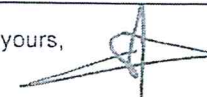
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The supplier/service provider is required to submit the billing statement within five (5) working days after the conduct of the activity.

Conforme:

Very truly yours,

*Patricio Guzman*  
Signature over printed name of Supplier  
8/21/2018  
Date

  
**USEC. MARIA LOURDES T. JARABE**  
Signature over Printed Name of Authorized Official  
Deputy National Program Director and OIC,  
*M* **KALAHI CIDSS-NCDDP**  
Designation *dh*

Fund Cluster: <u>310100-3-1</u>	ORS/BURS No.: <u>02-101151/NCDDP-2018-08-00636</u>
Funds Available: <u>250,600-</u>	Date of the ORS/BURS: <u>08/22/18</u>
<u><i>Odessa T. Villaceran</i></u> Signature over Printed Name of Chief Accountant/ OIC Division Chief Acctg. Division for Special Projects, FMS	Amount: <u>250,600-</u>



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TIN :	005-035-641-000		

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		<ul style="list-style-type: none"> <li>- Complimentary of pens and pads with registration table</li> <li>- Hotels should not be offering short term lodging associated with motels</li> <li>- Hotels should not be situated across or beside gambling establishment, casinos and not near funeral parlor.</li> </ul> <p align="center">xxxxxxxxxxxxxxxxnothing followsxxxxxxxxxxxxxxxx</p> <p>Reference PR No. : 2018061850 AOQ No. : 18-1052 - NP-Lease of Venue</p> <p align="center">Page 3 of 3 pages</p>			

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Conforme:  
*Khroman Patricke Avaman*  
Signature over printed name of Supplier  
  
Date 8/21/2018

Very truly yours,  
  
USEC. MARIA LOURDES T. JARABE  
Signature over Printed Name of Authorized Official  
Deputy National Program Director and OIC,  
M KALAHI CIDSS-NCDDP  
Designation

Cluster: 310180-13-1  
Available: 250,600-

ORS/BURS No.: 02-DIC/NCDDP-2018-08-00636  
Date of the ORS/BURS: 08/22/18  
Amount: 250,600-

*Odessa T. Villaceran*  
Signature over Printed Name of Chief Accountant/  
Division Chief Acctg. Division for Special Projects, FMS

OBLIGATION RE  
DEPARTMENT OF  
PAYEE  
OFFICE

