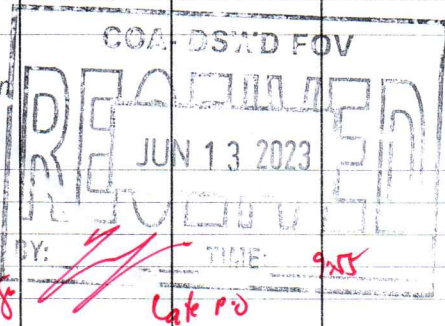


**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT FIELD OFFICE V**  
 Regional Center Site, Rawis, Legazpi City, Albay

**PURCHASE ORDER**

Supplier:	<b>CATANDUANES TWIN ROCK BEACH RESORT</b>	PO. No.:	<b>F 2304-0124</b>
Address:	Virac, Catanduanes	Date:	April 20, 2023
Contact No.:	09385558170	Mode of Procurement:	LEASE OF REAL PROPERTY AND VENUE
Gentlemen:	Please furnish this Office the following articles subject to the terms and conditions contained herein:	Payment Term:	Charge
Place of Delivery:	As specified in the contract	Delivery Term:	
Date of Delivery:	As specified in the contract	For Delivery Schedule and Queries Please Contact C.M.U.:	<b>09636984404</b>

Item No.	Unit	Description	Quantity	Unit Cost	Amount
		<b>PROVISION OF FOOD AND VENUE FOR THE CONDUCT OF TRAINING OF FIELD IMPLEMENTERS IN DEALING WITH STRESS AT WORK AND BASIC FINANCIAL MANAGEMENT FOR CATANDUANES FIELD IMPLEMENTERS IN VIRAC, CATANDUANES</b>			
		<b>May 9, 2023- Day 1</b>			
	pax	AM Snack, Lunch, PM Snack and Rental of Venue	50	545.00	27,250.00
		<b>May 10, 2023- Day 2</b>			
	pax	AM Snack, Lunch, PM Snack and Rental of Venue	50	545.00	27,250.00
		<i>Note: Guaranteed number of FOOD to be served on the 1st day or to be adjusted as per advance advice of the end-user. Food and Accomodation on the 2nd day to 4th day should be adjusted based on the actual number of participants</i>			


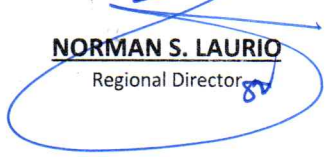


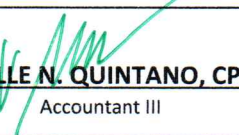
NOTE: This includes all items you conformed indicated in the RFQ.

Total Amount in Words:	Fifty Four Thousand Five Hundred Pesos and No Centavos	<b>54,500.00</b>
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**LIQUIDATED DAMAGES: One-Tenth Of One Percent (0.001) of the cost of the unperformed portion of the contract for every day of delay. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the DSWD FOV may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.**

Conforme:

 <b>CATANDUANES TWIN ROCK BEACH RESORT</b> Signature over Printed Name of Supplier	 <b>NORMAN S. LAURIO</b> Regional Director
Date: <u>5-09-23</u>	

Funds Available:	 <b>AMIABELLE N. QUINTANO, CPA</b> Accountant III	ORS No.: <u>23-04-0258</u> Amount: <u>54,500.00</u>
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