

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

**PURCHASE ORDER**

Supplier: <b>F.E. LEE SPORTSBAR AND RESTAURANT</b>		PO. No.: <b>F 2304-0173</b>
Address: <b>SORSOGON CITY</b>		Date: <b>May 02, 2023</b>
Contact No.:		Mode of Procurement: <b>LEASE OF REAL PROPERTY AND VENUE</b>
Gentlemen:	Please furnish this Office the following articles subject to the terms and conditions contained herein:	Payment Term: <b>Charge</b>
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	Quantity      Unit Cost      Amount
	<b>PROVISION OF FOOD AND VENUE DURING THE CONDUCT OF THE PROVINCIAL SEMESTRAL TRAINING WORKSHOP ON STRENGTHENING SWDI-BASED FULL CONTINUUM CASE MANAGEMENT FOR PANTAWID PROGRAM FIELD IMPLEMENTERS OF SORSOGON</b>	
	<b>FIRST SEMESTER</b>	
	May 18, 2023	
pax	AM Snack, Lunch, PM Snack and Rental of Venue	20      700.00      14,000.00
	May 19, 2023	
pax	AM Snack, Lunch, PM Snack and Rental of Venue	20      700.00      14,000.00
	<b>SECOND SEMESTER</b>	
	September 20, 2023	
pax	AM Snack, Lunch, PM Snack and Rental of Venue	20      700.00      14,000.00
	September 21, 2023	
pax	AM Snack, Lunch, PM Snack and Rental of Venue	20      700.00      14,000.00

COA-DSWD FOV  
**RECEIVED**  
 JUN 01 2023  
 BY: *[Signature]*      TIME: **10:40 am**

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

Total Amount in Words:	Fifty Six Thousand Pesos and No Centavos	<b>56,000.00</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: *[Signature]*  
**F.E. LEE SPORTSBAR AND RESTAURANT**  
 Signature over Printed Name of Supplier  
 Date: **May 18, 2023**

**NORMAN S. LAURIO**  
 Regional Director *[Signature]*

Funds Available: *[Signature]*  
**AMIABELLE N. QUINTANO, CPA**  
 Accountant III

ORS No.: **23-05-02956**  
 Amount: **56,000.00**