## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT FIELD OFFICE V

Regional Center Site, Rawis, Legazpi City, Albay

**PURCHASE ORDER** 

Supplier: Address:		GOGON, LEGAZPI CITY		PO. No.:	F 2406-0224 June 4, 2024	
				Date:		
Contact No.				Mode of Procurement:	NEGOTIATED PROCUREMENT - LEASE OF REAL PROPE	
		Please furnish this Office the following articles subject	Please furnish this Office the following articles subject to the terms and conditions		AND VENUE Charge	
Gentlemen:	1	contained herein:		Payment Term: Delivery Term:		Days
Place of Del	livery:					09636984404
Date of Delivery:				For Delivery Schedule and Queries Please Contact C.M.U:		09923015628 09552161070
Item No.	Unit			Quantity	Unit Cost	Amount
		PROVISION OF FOOD AND VENUE FOR THE MID-YEAR CHECKPOIN' AND RECALIBRATION OF INDIVIDUAL PERFORMANCE CONTRACT (IPC) OF PANTAWID STAFF IN LEGAZPI CITY				
						-
		June 5, 12.24				-
	pax	AM Snack Snack and Rental of Venue	e /	46	590.00	27,140.00
		June 6, 2024				-
	pax	AM Snack, Lunch, PM Snack and Rental of Venue	e /	46	590.00	27,140.00
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Total Amount in Words:		Fifty Four Thousand Two Hundred Eighty Pesos and No Centavos				54,280.00
Note: In case	se of fortuite	ll Amenities, you are found in the Standard Requirements for Ver tous even to or only to the last that the number of participants	nue attached in the RFQ. s is reduced, adjustment shall be m.		lut of the activity or	in the currending days
Note: Guara LIQUIDATED	anteed only <b>D DAMAG</b> I	ly in the 1st day of activity or per advance notice of End User, Whil iES: One-Tenth Of One Percent (0.001) of the cost of the unper	ile actual on the succeeding days. rformed portion of the contract fo	or every day of delay	y. Once the cumul	ative amount of liquidated
damages re	eaches ten	n percent (10%) of the amount of the contract, the DSWD FOV ircumstances.	may rescind or terminate the con	itract, without preju	dice to other cour	rses of action and remedies

Conforme:

KAIROS FOOD & ALLIED SERVICES CORPORATION

Signature over Printed Name of Supplier

6-5-24

Funds Available:

AMIABELLE N. QUINTANO, CPA

Accountant III

RD D. DE LEOZ

ORS No.:

24-06-06241

Amount:

**NORMAN S. LAURIQ** 

**Regional Director**