



PURCHASE ORDER

PR No. 02-0151-2024-04-M0207

Supplier : **KOK TZI DEVELOPMENT INC. (CHANDLER SUITES)**
Address : ES Pajares Avenue, Gatas, Pagadian City
TIN : _____

P.O. No. : 2024-05-106
Date : 9-May-2024
Mode of Procurement : AMP-NP 53.10

Gentlemen: **MS. JONAFE J. DONALLO**

Reso No. M141 s. 2024

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

Place of Delivery : DEPARTMENT OF ENERGY - Mindanao Field Office, 3rd Flr Tolentino Bldg. Candelaria Ave., Davao City (T.R. Alingalan)
Date of Delivery : _____

Delivery Term : _____ as per event's schedule
Payment Term : Payment will be process within 30 days upon completion of delivery of all items and services, submission of all required documents & issuance of certificate of acceptance from the end-user. Payment is through Check subject to government budgeting, accounting and auditing rules.

Stock/Property No.	Unit	Description	Quantity	Unit Cost	Amount
	lot	PROCUREMENT OF VENUE AND MEALS FOR THE 2024 MINDANAO JOINT FOCUSED INSPECTION ACTIVITIES WITH OIMB AND FIELD OFFICES SCOPE OF SERVICE: The supplier is responsible for the provision of foods/meals and beverages for the participants with the following specifications: Activity Date: May 14, 2024 Activity: Coordination/Organizational Meeting with Cooperators AM snacks for 50pax Buffet Lunch for 50pax Activity Date: June 2, 2024 Activity: FI Orientation Meeting Dinner for 50pax Activity Date: June 7, 2024 Activity: FI Exit Meeting Dinner for 50pax *See attached Terms of Reference (TOR) for further details.	1	103,700.00	103,700.00
TOTAL					103,700.00

(Total Amount in Words) **One Hundred Three Thousand Seven Hundred Pesos Only**

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 on the underdelivered item/s.
This PO serves as the Notice to Proceed (NTP) when signed by the Supplier.

Conforme:
Signature over Printed Name of Supplier

Very Truly yours:
Signature over Printed Name of Authorized Official

cbc/TRA

Director, MFO

05-10-24
Date

Designation

Fund Cluster : _____
Funds Available : _____

ORS/BURS No. : _____
Date of the ORS/BURS: _____