## **PURCHASE ORDER**

Department of Social Welfare and Development Cordillera Administrative Office

Quantitati			<del>-</del> -		Annex G-5
Supplier Address		37 LOWER TACAY RD., ZARATE VILL., GUISAD, BAGUIO CITY		Purchase Order No.	
					3/22/2023
Gentleme			Mode of Procu	rement	\$VP
Place of E	Pleas	se furnish this office the following articles subject to the terms and conc AS INDICATED	litions herein.		
Date of De		AS SCHEDULED		Delivery Term:	
Stock/	Unit	Description	077/	Payment Term: Unit	Charge Total
Property HIRE OF V	VEHICLE FOR	<u> </u>	QTY	Cost	Cont
4PS AND	SLP: THE CAS	THE CONDUCT OF FIELD OFFICE INITIATED RESEARCH STUDY ENTITLE SE OF DSWD FIELD OFFICE CORDILLERA (DSWD-CAR)	D "BEST PRACTIC	E IN THE IMPLE	MENTATION OF
		TRAVEL FROM BAGUIO TO APAYAO	<del></del>		
	day	Tentative Date: May 1-2, 2023	2	7.000.00	44.000.00
		Required Vehicle: VAN	1	7,000.00	14,000.00
		TRAVEL FROM APAYAO TO KALINGA TO BAGUIO			
	day	Tentative Date: May 3-4, 2023	2	6,000.00	12 000 00
		Required Vehicle: VAN		5,000.00	12,000.00 ر
		TRAVEL FROM BAGUIO TO BANGUED, ABRA AND VICE VERSA			
	day	Tentative Date: March 26-28, 2023 Required Vehicle: VAN	3	6,000.00	_ 18,000.00
		required verifice. VAN		0,000.00	J 18,000.00
		TRAVEL FROM BAGUIO TO IFUGAO			<del></del>
	day	Tentative Date: April 20-21, 2023 Required Vehicle: VAN	2	6.500.00	13,000.00
	<u></u>	Troduisa veriale, VAIV		5,555.55	/ 10,000.00
	-	TRAVEL FROM IFUGAO TO MT. PROVINCE TO BAGUIO	<del>-</del>		
i	day	Tentative Date: April 22, 2023 Required Vehicle: VAN	1 1	6,000.00	6,000.00
				0,000.00	0,000.00
	QUIREMENT			COMPLIANCE	
		icle year model must be at least 2017 and up		✓	
	Fully air condit			✓	
	Attach up to date OR, CR, Driver's License, Certificate of Public Convenience for 1 vehicle			✓	
	Fuel, food and lodging of the drivers will be handled by the service provider			✓	
	Schedule of tra-	avel and destination can be moved/changed and shall be coordinated with the si el date at any given time during emergencies/disaster wherin immediate need o	upplier 1 or 2 days		
	be observed	or same or any larger rule during emergencies/disaster wherin immediate used o	of the vehicle will	•	
	Drivers should	be well familiar with road terms	/		
	All drivers sche	eduled to travel should be subjected to a RT-PCR/Antigen test within three (3 days			
i	and submit a l	nedical certificate and travel pass and/or any documents being required by the r	eceiving province		
i	RT-PCR/Antig	The service provider shall shoulder the coat of RT-PCR/Antigen test and other an test result or medical certificate and all the necessary travel pass should be s	documents. The	~	
1	rue acuednied	travel.			
,	Service venick orsanitizer Sh	es must be regularly sanitized/ disinfected before and after each travel with read ould maintain physical distancing and ensure that the driver and passengers w	y available alcohol		
1	miconductifie	travel		•	
	Service provide	or must ensure to provide vehicle that is in good condition and fully equipped with	_		
;	With namit to	fire extinguisher. travel to any point of Luzon		•	
			i	<b>'</b>	
	Availability of First Aid Kit with the necessary medical paraphemalia and accessories for each vehicle Charges will be based on the actual days of travel				
				<b>✓</b>	
		ivalent to 24 hours	i	<b>✓</b>	İ
,	Service Provide	is not limited to only one destination for 1 day		✓	
`	MIN DE GEGRICIE	er must have Active Landbank Account for Payment Purposes. For other banks, d upon payment on the account.	- 1	<b>✓</b>	
	***Payme	ent can be made monthly or every after conduct of services based on the a	ctual number days	traveled	
(Amount	(in words)	Sixty Three Thousand Peed		TOTAL	63,000.00
		· · · · · · · · · · · · · · · · · · ·	<del></del>	<u> </u>	]
1 Case of fa	allure to make	the full delivery within the time specified above, a penalty of one-tenth (1/10) of	ona percent for ever	y day of delay sha	If the imposed on
		<i>n</i> '		/-	
onforme:	0	th.		111	
1		<b>1 1 1 1 1 1 1 1 1 1</b>			
<u> </u>	WHE LYN		/	EO L. QUINTILL	
(/Sign	nature over Pri	nted Name) Date	/ =	Regional Director	2
AND	BANL	y the PH-48Phus 355/ 014532			
B	ank Account N	iame Bank Account Number			
70	3 224 :	783 N JVIIE 2017			
	10.0	please tick tax type Date of BIR Registration			
	- [	vat			
	4			2023-03-03	ווו ליה התנופי
nd Cluster		re Corect			
nds Availa	ible:/Ç.ʒ	MAD 2 7 2022	ORS/ BURS No. : Date of the ORS/		2.7
	/	/ 1010 MAK / / /U/1 til 18	1		

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COMMISSION ON AUDIT

Amount:

63,000.00

WILBOURN B. BACOLONG

