



Republic of the Philippines
DEPARTMENT OF NATIONAL DEFENSE
OFFICE OF CIVIL DEFENSE VII

Labrador Bldg., N. Bacalso Ave., Sambag 1, Cebu City
 Tel. Nos. (032) 410-6451, 410-6452, 253-8730

PURCHASE ORDER

OFFICE OF CIVIL DEFENSE RO VII

Entity Name


Supplier: MIGGAB EATERY Address: 712 A Tres de Abril, Labangon Cebu City TIN: 726-591-259-000		P.O. No: 2021-02-007 Date: 02/25/2021 Mode of Procurement: 53.2			
Gentlemen: Please furnish this Office the following articles subject to the terms and conditions contained herein:					
Place of Delivery : Narra Conference Hall, DOH Region Office 7 Date of Delivery : March 01,03,05,08,10,12,15,17,19,22,24,26,29,31,2021 (14 days)		Delivery Term : _____ Payment Term : 15 days from received of SOA			
Stock/ Property No.	Unit	Description	Qty	Unit Cost	Amount
	Pax	Provision of packed meals and snacks for the daily operation of Joint IATGMEID7 and RDRRMC/RTF7 re COVID-19 for the month of March 2021. AGREEMENT WITNESSETH as follows: 1. MIGGAB EATERY shall provide OFFICE OF CIVIL DEFENSE REGIONAL OFFICE VII the Meal and Snacks (Lunch, AM & PM Snacks) for: 2. Event Name: Joint IATGMEID7 and RDRRMC/RTF7 re COVID-19 for the month of March 2021 3. Event Date & Location: March 01,03,05,08,10,12,15,17,19,22,24,26,29,31,2021 (14 days) 4. 12 persons x 250.00 per pax / 14days 5. Meal and snacks must be packed in reusable container with fork and spoon. 6. Delivery Time: Breakfast: 9:00AM Lunch: 11:50 AM Dinner: 3:00PM 7. Catering/Supplier must be able to adjust to the abrupt changes in the number of persons/pax needed for the event.	12 For 14 days	250	42,000.00

	<p>8. Use clean, biodegradable, environment friendly and/ or reusable containers</p> <p>9. Flexible with dietary requirements</p> <p>10. Meals must be balanced with a variety of fish, vegetables, pork, chicken, beef, and dietary flexibility for participants with allergy and non-pork eaters.</p> <p>11. The payment due to the MIGGAB EATERY shall be paid by the Agency within fifteen (15) days after the receipt of the submitted billing statement/ statement of account;</p> <p>12. MIGGAB EATERY agreed a Send Bill Policy in the payment of services.</p> <p>13. Both parties shall not be liable for failure to comply with this agreement due to force majeure including but not limited to labor disputes, natural disaster, or other causes beyond the control of both parties.</p>			
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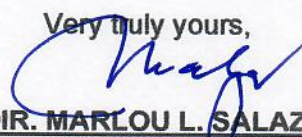
(Total Amount in Words): Forty-Two Thousand Pesos Only **42,000.00**

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 undelivered item/s.

Conforme:

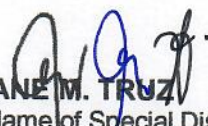

MIGGAB EATERY
 Signature over Printed Name of Supplier

Feb. 26, 2011
 Date

Very truly yours,

DIR. MARLOU L. SALAZAR
 Signature over Printed Name of Authorized Official

Regional Director, OCD7
 Designation

Fund Cluster : _____
 Fund Available: _____


DIANE M. TRUZ
 Signature over Printed Name of Special Disbursing Officer

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