Name of Procuring Entity:LGU-Province of Davao de Oro Standard Form No. SF-GOOD-58 Revised:May 24,2004 Std. Form Title:Purchase Order

PURCHASE ORDER

APR 0 3 2025

Province of Davao de Oro Agency/Procuring Entity

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Supplier: SACCKI ENTERPRISES AND CATERING SERVICES			PO Number: 25030360		
Address: MANGGA, PUROK SAMPAGUITA, TAGUM CITY			Date: 03/26/25		
-mail Address: el. No.:			Mode of Procurement SVP PR Number: 25-C0316		
er. No IN: 920-024-419-000					
entlemen:					44400
Please fu	nish this office t	he following artic	cles subject to the terms and conditions contained herein:		
ace of Delive	ry: Venue	: Within Capitol	Delivery Term:		
ate of Deliver	y: As per	activity	Payment Term:		
Stock No	. Unit of Issue	Quantity	Description	Unit Cost	Amount
¹ 35281N	head/s	165.00	Meal A (Buffet)Two (2) viands of meat (1 fish/seafood and 1 either pork, beef or chicken); One (1) viand of vegetables/soup One (1) serving of rice One (1) serving of dessert/fruits One (1) bottled cold drink (Soda or Juice) One (1) bottled Drinking Water 350ml Other Conditions: Flowing coffee with sugar and creamer	340.00	56,100.00
			should be made available during the entire event		
² 37247N	Head/s	230.00	Snacks A-1Kakanin (3 kinds) Drinks (coffee/milo/juice/softdrinks)	100.00	23,000.00
³ 37249N	Head/s	110.00	Snacks B-1Sliced Cake/Sandwich Drinks (coffee/milo/juice/softdrinks)	110.00	12,100.00
			Terms and Conditions: "Observance of Single-use Plastic products regulations ordinance PROGRESS BILLING	COMMISSION ON AUL	OIT DAVAO DE ORO
	R1. 0/4.		FOR USE OF PLSB & LFC MEETINGS - 2ND QUARTER DELIVERY PLACE:WITHIN CAPITOL	DATE: VI	2 m
	J. 100 100 100 100 100 100 100 100 100 10		THE AWARD IS BASED ON ABSTRACT	No second	7
otal Amount in	Words:				
	of delay shal Mon f	be imposed	name of DORC	OTHY M. GONZAGA Governor	dy Authority or the Govern
	7-1780	Date	ļ	uthorized Official	AADYLLJAW WYKN Executivy assistan
Amount: 9					
	57		suant to section 369(a) of RA 7180, this portion mus	st be	
Aprroved p Certified	er sangguni	an Resolution	n Date		

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Page 2

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			Mode of			
el. No.:						
	920-024-4	19-000			PR Number:	25-C0316
	emen: Please furr	nish this office	the following art	icles subject to the terms and conditions contained here	ein:	
	of Deliver		: Within Capitol			
	of Delivery		activity	Payment Tel		
		Unit of Issue				
10.			Quantity	Description	Unit Cost	Amount
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In ev	case of fa ery day o	ailure to mal of delay shal	ke the full de I þe imposed	livery within the time specified above, a pen-	alty of one tenth (1/10) of	one (1) percent for
			1 Nr	1		
Co	nform	Man	tell (Gra	moders Very truly		
	3 	Signature	over printed	name of	DOROTHY M. GONZA	GA By Authority of the Gove no
	5-		7-8-2 Date	<u> </u>	Governor Authorized Official	MADYLLIAN M PEN
GE	NERAL		Date		Authorized Official	Executive Assistan
		0571-	04-35-	105	•	
Re	sponsibil	ity Center:	-1 -1			
An	ount: 9	1,200.00				
(In	case of I	Vegotiated I	Purchase pur	rsuant to section 369(a) of RA 7180, this por	tion must be	
		er Sangguni	an Resolutio	n		
Ce	rtified			Date	<u> </u>	