

PURCHASE ORDER
Province of Davao de Oro
Agency/Procuring Entity

MAR 27 2025

Supplier: JEMAR CATERING SERVICES	PO Number: 25030426
Address: PUROK 18, POBLACION, NABUNTURAN, DAVAO DE ORO	Date: 03/31/25
E-mail Address:	Mode of Procurement SVP
Tel. No.:	PR Number: 25-1693
TIN: 460-095-388-000	

Gentlemen:

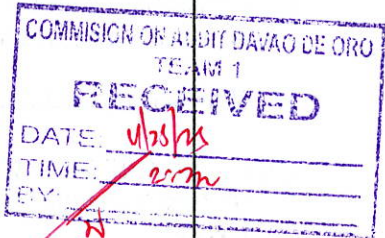
Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery: Within Davao de Oro	Delivery Term:
Date of Delivery: As per activity	Payment Term:

No.	Stock No.	Unit of Issue	Quantity	Description	Unit Cost	Amount
1	37242N	Head/s	500.00	PACKED MEALS C Two (2) viands of meat (1 fish and 1 either pork, beef or chicken) One (1) viand of vegetables One (1) serving of rice One (1) bottled drink (Soda or Juice)	250.00	125,000.00
2	37247N	Head/s	500.00	Snacks A-1 Kakanin (3 kinds) Drinks (coffee/milo/juice/softdrinks)	105.00	52,500.00
3	37253N	Head/s	500.00	Snacks D-1 Pasta or Pancit with bread and buttered chicken Drinks (coffee/milo/juice/softdrinks)Terms and Conditions: >Observance of single-use plastic products regulation as per ordinance of Davao de Oro >Servers should be on their hairnets, face masks, and wear disposable gloves. >Free Delivery within Davao de Oro >Progress Billing	190.00	95,000.00

for the use of PPOC activities

THE AWARD IS BASED ON ABSTRACT NO. 2503212 UNDER REQUEST FOR QUOTATION NO.03-25-0489 OPENED ON March 26, 2025



Total Amount in Words: Two Hundred Seventy Two Thousand Five Hundred Pesos Only	272,500.00
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In case of failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for every day of delay shall be imposed.

Conform	Very truly
<div>Signature over printed name of 03-27-25</div>	<div>DOROTHY M. GONZAGA Governor Authorized Official</div>
Date	

GENERAL
OBR No.: 0640-04-25-101
Responsibility Center:
Amount: 272,500.00

(In case of Negotiated Purchase pursuant to section 369(a) of RA 7180, this portion must be
Approved per Sanggunian Resolution _____
Certified _____ Date _____