



Republic of the Philippines  
**DEPARTMENT OF JUSTICE**  
**OFFICE OF THE REGIONAL PROSECUTOR**  
Region IX, Zamboanga City

**PURCHASE ORDER**

Supplier: **Chandler Suites**  
Address: **F. S. Fajares Ave, Pagadian City, Zamboanga del Sur**  
TIN: **423-052-166-000**

P.O No.: **2023-12-12**  
Date : **September 18, 2023**  
Mode of  
Procurement: **Negotiated  
Procurement**

**Gentlemen:**

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

Place of Delivery: Chandler Suites, Pagadian City			Delivery Term:		
Date of Delivery: November 6-8, 2023			Payment Term: SEND BILL		
QTY	UNIT	ITEMS/ DESCRIPTION	QTY	UNIT COST PER PAX	AMOUNT
50	pax	<b>AM SNACKS</b>	50	150.00 x 3 days	22,500.00
		Cheese Pimiento Sandwich with Juice			
50	pax	<b>LUNCH</b> Plain Rice, Sinigang Shrimp, Cauliflower w/ Beef, Sotanghon Guisado, Chicken Honey, Shanghai Lumpia (Beef) <b>Dessert:</b> Fruit in Season <b>Drinks:</b> Bottled Softdrinks-assorted	50	370.00 x 3 days	55,500.00
		<b>PM SNACKS</b>			
50	pax	Spaghetti with Toasted Bread	50	150.00 x 3 days	22,500.00
		Drinks: Bottled Softdrinks-assorted			
50	pax	<b>DINNER</b> Plain Rice, Sweet Corn Soup, Sweet and Sour Meat Balls, Buttered Chicken, Fresh Mushroom w/ Chicken Meat <b>Dessert:</b> Mango Gelatin <b>Drinks:</b> Bottled Softdrinks-assorted	50	350.00 x 3 days	52,500.00
		<b>ACCOMMODATION</b>			
5	rooms	Single Bedroom <b>November 6-8, 2023</b>	5	1,350.00 x 3 days	20,250.00
23	rooms	Twin Bedroom <b>November 6-8, 2023</b>	23	1,500.00 x 3 days	103,500.00
<b>TOTAL</b>					<b>276,750.00</b>

**Two Hundred Seventy Six Thousand Seven Hundred Fifty**

In case of failure to make 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.

Very truly yours,

Conforme:

**DENNIS F. ARAQJO**  
Regional Prosecutor

FUND CLUSTER: \_\_\_\_\_  
FUNDS AVAILABLE: \_\_\_\_\_

ORS/BURS No: \_\_\_\_\_  
Date of the ORS/BURS: \_\_\_\_\_  
Amount: \_\_\_\_\_

\_\_\_\_\_  
Signature over printed name of Chief Accountant /  
Head of Accounting Division/Unit