



WORK ORDER

DELIVERY DUE DATE: C.O.D.

Procurement Unit
Tel. No.: 045-606-8142/606-8157

Supplier: **DEPARTMENT OF EDUCATION TEACHERS' CAMP**
Address: **Baguio City**
TIN:
Tel. No.: **074-442 3517/442-4417**

Work Order No.: **2024-197**
Date: **6/19/2024**
JO No. **2024-208**
Date: **5/23/2024**
Mode of Procurement: **Agency to Agency**
Mode of Payment: **COD**

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work on **June 27-28, 2024** upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QTY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
1	lot	LABOR & MATERIALS: ACCOMMODATION SERVICES (50pax) Accommodation with 1 Function Hall, Sound System and Projector for the Annual Planning and Activities for Student/College Publications and Organizations on June 27-28, 2024, at Baguio City TEACHER'S CAMP -DORMITORY TYPE: Hernandez Dorm with 50 beds (50pax) = 15,450.00 -No internet/wifi connection in the lodge -Check in time: 2pm -Check out time: 12nn *Available Conference and Dining Hall -QUEZON UP w/LCD projector, 1 mtr. sound system, chairs, tables (50pax) = 12,320.00 -FOOD CORKAGE = 4,000 *Guest are provided with complete toiletries and drinking water *BTC has limited internet or wireless connection in conference hall	31,770.00	31,770.00

Charge to: *[Signature]*
ROA No.: *[Signature]*
CONFORME & [Signature]



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(Please read carefully at the back hereof)

Charge to: 2024-197
ROA No. : 2024-197-1996
CONFORME & RECEIVE COPY :



DEPARTMENT OF EDUCATION TEACHERS' CAMP

Firm/Dealer/Supplier/Contractor

Bank Account Name: _____

Bank Account Number: _____

Bank Name: _____

Bank Address: _____

FUNDS AVAILABLE:

JASPER A. YAUDER, CPA

Budget Officer

APPROVED:

DR. ARNOLD E. VELASCO

President [Signature]

Authorized Official