



**PURCHASE ORDER**  
 Department of Education  
 National Capital Region  
 DepEd - Muntinlupa City

Supplier: **BALAI BAGNET FOOD HUB**  
 Address: 188 San Guillermo St. Putatan Muntinlupa City

P.O. No.: **PO-RFQ-2025-05-0001**  
 Date: **05/15/25**  
 Mode of Procurement: **SMALL VALUE PROCUREMENT**

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

Place of Delivery : <u>Sucal senior High School</u>		Delivery Term : <u>Delivered At Place</u>			
Date of Delivery : <u>May 18 - 20, 2025</u>					
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
		<b>DIVISION AND SCHOOL ASSESSORS TRAINING ON EXECUTIVE ORDER 174: EXPANDED CAREER PROGRESSION SYSTEM FOR TEACHERS (MAY 18-20, 2025)</b>			
	pax	<b>18-May-25</b>	120	₱ 375.00	₱ 45,000.00
		<b>AM SNACKS</b>			
		Creamy Chicken Sopas with Hard Boiled Egg			
		Bottled Water (500 ml)			
		<b>LUNCH</b>			
		Laing with Bagnet			
		Fried Bangus			
		Pork Adobo			
		Rice			
		Bottled Water (500 ml)			
		<b>PM SNACKS</b>			
		Canton with Puto			
		Bottled Water (500 ml)			
		*with overflowing coffee and candies			
		*Place of Delivery: Sucat Senior High School			
	pax	<b>19-May-25</b>	120	₱ 375.00	₱ 45,000.00
		<b>AM SNACKS</b>			
		Tuna Pasta with Croutons (bread pan)			
		Bottled Water (500 ml)			
		<b>LUNCH</b>			
		Pork Caldereta			
		Fish Katsu			
		Fried Kangkong with Bagoong			
		Rice			
		Bottled Water (500 ml)			
		<b>PM SNACKS</b>			
		Overload Sandwich			
		Bottled Water (500 ml)			
		*with overflowing coffee and candies			
		*Place of Delivery: Sucat Senior High School			

(Total Amount in Words)

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:   
 Signature over Printed Name of Supplier  
 Date: May 15, 2025

Very truly yours,  
  
**VIOLETA M. BOMZALES CESO VI**  
 Assistant Schools Division Superintendent  
 Officer-In-Charge  
 Office of the Schools Division Superintendent

Fund Cluster : \_\_\_\_\_  
 Funds Available : \_\_\_\_\_  
  
 Signature over Printed Name of Chief Accountant/  
 Head of Accounting Division/Unit

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

