



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
Field Office VII
Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

REQUEST FOR QUOTATION
NP - Community Participation

RFQ No. : DSWD7-2025-0614 /
Date : May 21, 2025

Company Name : _____
Company Address : _____
Contact Person : _____
Contact No. : _____

Sir/Madam:

Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. Failure to indicate information could be the basis for non-compliance. Also, kindly furnish us with descriptive brochures, catalogues, literatures and/or samples, if applicable.


Please accomplish and submit this **form** together with **Annex A, Annex B with the eligibility requirements/documents** and **Bank Information** to the BAC Secretariat, DSWD Field Office VII, Cebu City or send it through facsimile numbers (032) 887-9720; 232-0261; 231-2172 local 17140 or 17110 or e-mail to bac.fo7@dswd.gov.ph on or before **May 26, 2025 at 4:00PM.**

Very truly yours,


ENGR. EMMANUEL M. EDLES
AO V/Head, Procurement Management Section

Terms and Conditions:

- Award shall be made on per: ☐ item basis ☒ total quoted price ☐ lot basis
- Quotation validity shall be not less than **60 calendar days.**
- Good/s or Services shall be delivered **as need arises or as to delivery schedule provided by the end-user.**
- Place of Delivery: ☒ **Regional Haven for Women, Camomot Franza Rd., Brgy Labangon, Cebu City**
- Terms of Payment: **within 45 calendar days from the receipt of billing statement/Sales Invoice**
- Liquidated Damages/Penalty: **One-tenth of one percent for everyday of delay shall be imposed.**
- In case of discrepancy between total price per item and unit price for the item as extended or multiplied by the quantity of that item, the latter shall prevail.
- Warranty period, if applicable: _____


REINAFLO R. C. VISTO
Canvasser

I am interested to quote and agree to the terms and conditions.

Signature of Supplier/Authorized Representative
over Printed Name

NOTE: Authorized Representative must be supported with a Secretary's Certificate.



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
Field Office VII, Cebu City

Company Name: _____
 Company Address: _____
 Contact Person: _____
 Contact No.: _____
 TIN: _____

RFQ No.: DSWD7-2025-0614 ✓
 Date: May 21, 2025

Item No.	Qty.	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
			Supply and Delivery of the following food items:				
			Regional Haven for Women, Camomot Franza Rd., Brgy Labangon, Cebu City				
1	24	piece	All Purpose Cream, 250ml				
2	10	gallon	Mayonnaise, at least 3.5 liters				
3	20	bottle	Oyster sauce, 14oz				
4	20	pack	Black Pepper, ground, 12s (12sachets per pack)			-	
5	30	can	Pineapple Tidbits, canned atleast 432g				
6	30	can	Pineapple Slice, canned atleast 227g				
7	15	can	Fruit Cocktail, atleast 836g				
8	30	tie	Seasoning Mix, tie, 8g per sachet				
9	26	pack	Black Pepper, whole, 100g/pack				
10	20	pack	Fry Breeding Mix, 238g				
11	15	pack	Crushed Grahams, 200g				
12	15	pack	Graham Crackers, 200g				
13	20	kg	Macaroni, Elbow 1kg				
14	20	bar	Butter, unsalted 200g				
15	20	kg	Bread crumbs, 1kg				
16	20	pouch	Raisin, 200g				
17	10	gallon	Sandwich Spread, 3.5L				
18	30	kg	Cake Flour, 1kg				
19	12	kg	Cassava Flour, 1kg				
20	20	pack	Gelatin/Gulaman, 25gx10s, assorted flavor				
21	36	pack	Broth Cubes, chicken/beef, 120g				
22	25	bottle	Kaong (assorted) 8oz				
23	11	pouch	Pickle Relish, 100g				
24	20	pouch	Carbonara Sauce, 200g				
25	25	piece	Cling Wrap, 15"x300m				

Item No.	Qty.	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost				
26	25	piece	Aluminum Foil, 30x16 ✓								
27	25	pack	Table Napkin, folded, 350 sheets ✓								
28	10	piece	Vanilla Extract, 20ml ✓								
29	10	kg	Popcorn, 1kg ✓								
30	25	pouch	Sinigang Mix, (Original and Gabi), 22g ✓								
31	40	can	Green Peas, 155g ✓								
32	28	pack	Juice, Powdered, at least 800 grams per pack (asstd. flavors) ✓								
33	4	box	Milk, Infant formula for 0-6 months old, at least 1.2kg/box ✓								
34	4	box	Milk, Infant formula for 6-12 months old, 6 boxes/case, at least 1.3kg/box ✓								
35	9	box	Milk, Hypoallergenic Infant formula for 1 year old onward, 6 boxes/case, at least 1.2kg/box ✓								
			Other Specifications:								
			> All food items must be in good quality, free from abnormal discoloration, foul smelling odor and molds and fit for human consumption.								
			> Has label and must indicate the manufacturing or expiration date and expiration date must be at least six months from the delivery.								
			> For Canned goods, must have no dents and rusts.								
			> Defective or spoiled items upon checking must be replaced by the service provider.								
			> Delivery will be on weekly basis based on the prescribed schedule of delivery by end-user or as need arises.								
TOTAL											
Approved Budget for the Contract: Php 137,000.00 ✓				"Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable.							
End User:	Regional Haven for Women ✓										
PURPOSE :	For the Regional Haven for Women's consumption for the second semester of CY 2025.										

Note: Procurement procedure in accordance with DSWD-Memorandum Circular No. 2, Series of 2007.


REINAFLOR C. VISTO
 Canvasser

 Signature of Supplier/Authorized Representative over Printed Name

NOTE: Authorized Representative must be supported with a Secretary's Certificate.

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
Field Office VII, Cebu City

RFQ No.: DSWD7-2025-0614Date: May 21, 2025

CBO/Supplier's Name : _____

Address : _____

Contact Person : _____

Contact No. : _____

CHECKLIST OF ELIGIBILITY REQUIREMENTS

as provided in Annex "A" of the GPPB Resolution No. 18-2021 dated 22 October 2021
(Organized CBOs)

No.	Type of Document	Remarks/Pls. Specify the type of document
	LEGAL REQUIREMENTS	
1	Certificate of Registration from DTI, SEC, CDA, DA, DOLE, NCIP, or in the case of Civil Society Organizations (CSG), Non-Government Organizations or Peoples' Organizations that are compliant with the requirements of a CSG, registration from National Government Agency (NGA) or Local Government Unit (LGU)	
2	A sworn affidavit (Appendix "1") , pls. see attached template, executed by the head or its authorized representative that affirms that: 2.1 <i>none of its incorporators, officers or members is an agent or related by consanguinity or affinity up to the third (3rd) civil degree to the HoPE, a member of the BAC, the Technical Working Group (TWG) or the Secretariat, or other official authorized to process and / or approve the proposal, contract, and release of funds; and</i> 2.2 <i>none of its incorporators, officers or members has a related business to the Community-based Project being procured at hand; or disclosure of the members if they have related business, if any, to the Community-based Project being procured at hand and the extent or percentage of ownership or interest therein.</i>	
	TECHNICAL REQUIREMENT	
3	Statement of all its completed contracts similar to the Community-based Projects to be bid and/or list indicating the work experiences of their members that reflect the capacity to deliver the Goods. (Please see attached Annex "2") The End-user's acceptance or official receipt(s) or sales invoice issued for the completed contracts shall be attached to the Statement as proof thereof.	
	FINANCIAL REQUIREMENTS	
4	Photocopy or scanned copy of the bank book with complete bank account information; or a proof that it maintains books of accounts such as cash receipts journal, cash disbursement journal, general journal, and general ledger.	
5	Latest Income Tax Return (ITR) for the preceding Tax Year or for new establishments, the most recent quarter's ITR or Business Tax Return	
6	Updated Audited Financial Statement (AFS) , which should not be earlier than two (2) years from the date of bid submission. The AFS shall be stamped received by the Bureau of Internal Revenue (BIR) or accredited and authorized institutions, or electronically received via the AFS e-submission of the BIR with a filing reference number.	

Signature of Supplier / Authorized Representative Over Printed Name