DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT KALAHI-CIDSS NATIONAL COMMUNITY DRIVEN DEVELOPMENT PROJECT

Field Office VII MJ Cuenco Avenue, Cebu City Telephone No. 233-0261

REQUEST FOR QUOTATION OF GOODS SHOPPING

Date of Request:	May 2, 2023	RFQ No.	2023-0085 KC-FO7			
Company name:						
Address:						
Contact Person:	2					
Contact Number:						
Sir/Madam:						
quotations for the follo	wing items in Annex A:		P-AF) hereby requests you to submit price			
quantities.			ry technical specifications and required			
You may quote for a supplier(s)/ service pro	any or more items under this request oviders offering the lowest evaluate	st. Each item shall be evaluat d price on per;	ed and contract awarded separately to the			
Item Ba			Lot Basis			
catalogue(s) and other supplier(s) / service pr	r printed materials or pertinent infor ovider(s) providing after sales serv	mation in English for each ite ice facilities in the Philippines				
 The deadline for red May 5, 2023, 1:00PM. 	ceipt of your quotation (s) by the KC	-NCDDP-AF at the address i	ndicated in the Paragraph 6 is:			
5. Your quotation(s) sh the following:	nould be submitted as per the follow	ving instruction and in accord	ance with the Terms and Conditions including			
a. Prices: The	prices should be quoted for Cater	ing Services to be delivered	in Basay, Negros Oriental.			
b. Evaluation	of Quotations: Offers determined	to be substantially responsiv	re to the technical specifications will be evaluated			
by compariso	n of their prices. In evaluating the o	uotations, the Purchaser will	adjust any arithmetical errors as follows: ords, the amount in words will govern;			
	e there is a discrepancy between the intity, the unit rate as quoted will go		total resulting from multiplying the unit rate by			
	Supplier refuses to accept the corre					
In a	addition to the quoted price, the	evaluated price shall include as specified hereir	e Value Added Tax and other necessary taxes 1.			
technic	al and financial requirements.		fering the lowest evaluated price that meets the			
receipt	v. Validity of the Offer: Your quotation(s) should be valid for a period of sixty (60) calendar days from the deadline for eceipt of quotation(s) indicated in the paragraph 4 of this Request for Quotation.					
of a cor supplie	ntract when and if awarded, then the rs for the project for two years.	e supplier(s)/ service provide	validity period and/or refuse to accept the award r(s) will be excluded from the list of NCDDP-AF			
days (a termina	after signing of the contract) withou	t valid reason acceptable to to by the head of the procuring e	rm the services under the contract/PO within 30 he procuring entity (DSWD), the contract may be entity (HOPE); the procuring entity shall proceed to ass.			
viii. Li q terms,	uidated damages/penalty: In cas a penalty of one percent of the und	e of failure to make the full de elivered cost for every day of	elivery within the time specified in the delivery delay shall be imposed.			
	on can be obtained from: DSWD		CIDSS Office			
Teleph F-mail	The second secon	233-0261; 231-2172 local rement23@gmail.com	17126			
7. Please confirm by	y fax / e-mail the receipt of this i	equest and whether or not	you will submit the price quotation(s).			
Sincerely yours,						
7,110	2					
	ANUEL M. EDLES		Signature over printed name)			
	t Management Section/ 9 7 7 785: 233-0261; 231-2172 local 17126	t:	Supplier			

Annex A

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

RFQ No. 2023-0085 KC-FO7 Date: May 2, 2023

Company Name :	
Company Address :	The state of the s
TAX ID No.:	
Contact Person:	
Contact No. :	

ider's Specifications iled specifications in	81	Total Cos
orovided)		-
		-

PURPOSE : Provision of food for the participants of the activity.

PR No. 2023-0085 KC-FO7

IMPORTANT: The winning bidder MUST SIGN the original copy of Purchase Order (P.O.) or Letter Order (L.O.) within three (3)days from the date of receipt. FAILURE to sign the original P.O. / L.O. means that the bidder is not interested and will be a ground for suspension or blacklisting in DSWD's future biddings.

HENRY (Signature over printed name)

Contact #: +63-995-957-1008

(Signature over printed name) Supplier

Company Name	9:	
	REVIEW (G1P2)	
Day 1:	MENU	
Ham with Vegetables etc.)	2 Main Dish: (Choices of Beef; Pork;	PM Snacks: (Variation of Pasta, Noodles, Native Kakanin, i.e, Suman/Puto/Biko etc., Sandwiches, i.e., Tuna/Ham & Cheese/Egg with Vegetables, etc. or Burgers i.e., Beef/ Chicken/Ham with Vegetables, etc.):
Drinks: 500ml Bottled Water	(specify) Drinks: 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.) (specify) or 240ml Canned Juice: (specify) or 500ml Bottled Water	Drinks: 500ml Bottled Water or 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.) (specify) or 240ml Canned Juice: (specify) or Coffee/Hot Choco: (specify)
Doy 2		
Day 2:	MENU	
AM Snacks: (Variation of Pasta, Noodles, Native Kakanin, i.e. Suman/Puto/Biko etc., Sandwiches, i.e., Tuna/Ham & Cheese/Egg with Vegetables, etc. or Burgers i.e., Beef/ Chicken/Ham with Vegetables, etc.): Drinks: 500ml Bottled Water or 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.) (specify) or 240ml Canned Juice: (specify) or Coffee/Hot Choco: (specify)	2 Main Dish: (Choices of Beef; Pork; Chicken/ Fish): (specify) 1	PM Snacks: (Variation of Pasta, Noodles, Native Kakanin, i.e. Suman/Puto/Biko etc., Sandwiches, i.e., Tuna/Ham & Cheese/Egg with Vegetables, etc. or Burgers i.e., Beef/ Chicken/ Ham with Vegetables, etc.): Drinks: 500ml Bottled Water or 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.) (specify) or 240ml Canned Juice: (specify) or Coffee/Hot Choco: (specify)
Day 1:	ELOPMENT & MANAGEMENT TRAINING	G (G1P2)
	MENU	
AM Snacks: (Variation of Pasta, Noodles, Native Kakanin, i.e., Suman/Puto/Biko etc., Sandwiches, i.e., Tuna/Ham & Cheese/Egg with Vegetables, etc. or Burgers i.e., Beef/ Chicken/Ham with Vegetables, etc.): Drinks: 500ml Bottled Water or 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.) (specify) or 240ml Canned Juice: (specify) or Coffee/Hot Choco: (specify)	2 Main Dish: (Choices of Beef; Pork; Chicken/ Fish):	PM Snacks: (Variation of Pasta, Noodles, Native Kakanin, i.e, Suman/Puto/Biko etc., Sandwiches, i.e., Tuna/Ham & Cheese/Egg with Vegetables, etc. or Burgers i.e., Beef/ Chicken, Ham with Vegetables, etc.): Drinks: 500ml Bottled Water or 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.) (specify) or 240ml Canned Juice: (specify) or Coffee/Hot Choco: (specify)
2		

Day 2:		
Day 2.		
	MENU	
Drinks: 500ml Bottled Water	2 Main Dish: (Choices of Beef; Pork; Chicken/ Fish):	PM Snacks: (Variation of Pasta, Noodles, Native Kakanin, i.e, Suman/Puto/Biko etc. Sandwiches, i.e., Tuna/Ham & Cheese/Egg with Vegetables, etc. or Burgers i.e., Beef/ Chicken Ham with Vegetables, etc.): Drinks: 500ml Bottled Water or 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.) (specify) or 240ml Canned Juice: (specify) or Coffee/Hot Choco: (specify)
Activity Title:MDRRIVIC IMEETING CUM	ACCOUNTABILITY REPORTING (G1P2)	
1	MENU	
Native Kakanin, i.e. Suman/Puto/Biko etc., Sandwiches, i.e., Tuna/Ham & Cheese/Egg with Vegetables, etc. or Burgers i.e., Beef/ Chicken/Ham with Vegetables, etc.): Drinks: 500ml Bottled Water or 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.) (specify) or 240ml Canned Juice: (specify) or Coffee/Hot Choco: (specify)	Chicken/ Fish):	Native Kakanin, i.e., Suman/Puto/Biko etc Sandwiches, i.e., Tuna/Ham & Cheese/Egg wit Vegetables, etc. or Burgers i.e., Beef/ Chicker Ham with Vegetables, etc.): Drinks: 500ml Bottled Water or 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.) (specify) or 240ml Canned Juice: (specify) or Coffee/Hot Choco: (specify)

Company Name: _