



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

**REQUEST FOR QUOTATION
 SHOPPING**

RFQ No. : DSWD7-2022-1258
 Date : July 21, 2022

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

If you are the exclusive manufacturer, distributor or agent in the Philippines for the goods listed in Annex A, please attach in your quotation a duly notarized certification to this effect.

Interested service providers are required to submit true copies of their valid **Mayor's/Business Permit & Philgeps Registration Number** upon submission of quotation.

Please accomplish and submit this form together with **Annex A** and **Bank Information** to the BAC Secretariat, DSWD Field Office VII, Cebu City or send it through facsimile numbers (032) 233-8785; 233-0261; 231-2172 local 140 or 148 or e-mail to bac.fo7@dswd.gov.ph on or before **July 25, 2022 at 5:00PM.**

Very truly yours,


ROSARIO F. BACONG
 AO V/Head, Procurement Management Section

Terms and Conditions:

1. Award shall be made on per: item basis total quoted price lot basis
2. Quotation validity shall be not less than **60 calendar days.**
3. Good/s or Services shall be delivered **within 30 days calendar from receipt and conformity of Purchase**
4. Place of Delivery: **DSWD Field Office VII, Carreta, Cebu City**
5. Terms of Payment: **within 30 days from the receipt of billing statement.**
6. Liquidated Damages/Penalty: **One-tenth of one percent for everyday of delay shall be imposed.**
7. 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.
8. Warranty period, if applicable: _____


BONAPARTE D. CASEÑAS II
 Canvasser

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

 (Signature over Printed Name of Supplier / Service
 Provider / Authorized Representative)



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

Company Name _____
 Company Address _____
 Contact Person _____
 Contact No. _____
 PhilGEPS Registration No.: _____
 Tin Number: _____

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Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	60	cart	Toner for Laser Printer				
			<ul style="list-style-type: none"> ● Toner Type: Brand new Compatible or OEM Toner ISO Certified (ISO 9001, ISO 14001) IPO Registered ● Toner Print Output: Laser black, monochrome ● Toner Page Yield: at most 2,500 pages ● Toner Warranty: Should be free from materials defects Must be replaced if found defective ● Supplier must have a support office within Metro Cebu ● Printer Inclusion: Free use to own printer for every 50 toners ● Print, Copy and Scan with ADF ● At least 1 year free parts replacement and labor ● Brand New Printer 				
Approved Budget for the Contract: Php 153,000.00							
End User: SLP				Note: "Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable.			
PURPOSE : For the use of SLP Staffs during the implementation of the project for CY 2022							

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

Bonaparte DC II
BONAPARTE D. CASEÑAS II
 Canvasser

Signature of Supplier / Authorized Representative
 Over Printed Name