#### 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:	September 25, 2024	RFQ No.	2024-0124 KC-FO7
Company name:	#		
Address:			
Contact Person:	1—————————————————————————————————————		
Contact Number:	·		
Sir/Madam:	L t		
EX:	P		
	munity Driven Development Project - Addit owing items in Annex A:	ional Financing (NCDD	P-AF) hereby requests you to submit price
To assist you quantities.	in the prepartion of your price quotation, w	e enclose the necessa	ry technical specifications and required
	any or more items under this request. Eac roviders offering the lowest evaluated price		ed and contract awarded separately to the
Item E			Lot Basis
catalogue(s) and other	luplicate and in the English language, sho er printed materials or pertinent information provider(s) providing after sales service fac	n in English for each ite	m quoted, including names and addresses of
4. The deadline for re September 27, 2024	eceipt of your quotation (s) by the KC-NCD at 1:00 PM.	DP-AF at the address i	ndicated in the Paragraph 6 is:
5. Your quotation(s) following:	should be submitted as per the following in	struction and in accord	ance with the Terms and Conditions including the
iqilowing.	ie ie		
a. Prices: Th	e prices should be quoted for Catering Se	ervices to be delivered	in <u>Sagbayan, Bohol.</u>
A.	36		
	on of Quotations: Offers determined to be on of their prices. In evaluating the quotati		re to the technical specifications will be evaluated adjust any arithmetical errors as follows:
i. whe	re there is a discrepancy between the amo	unts in figures and in w	vords, the amount in words will govern;
	ere there is a discrepancy between the unit antity, the unit rate as quoted will govern;	rates and the line item	total resulting from multiplying the unit rate by
iii. if a	Supplier refuses to accept the correction,	his quotation will be rej	ected.
În În	addition to the quoted price, the evalua-	ated price shall includ as specified hereir	e Value Added Tax and other necessary taxes n.
	ard of Purchase Order: The award will be call and financial requirements.	e made to the bidder of	fering the lowest evaluated price that meets the
v. <b>Val</b> receip	idity of the Offer: Your quotation(s) shoul t of quotation(s) indicated in the paragraph	d be valid for a period o	of sixty (60) calendar days from the deadline for Quotation.
of a c	vi. If the <b>supplier/service provider</b> withdraw your quotation during the validity period and/or refuse to accept the award of a contract when and if awarded, then the supplier(s)/ service provider(s) will be excluded from the list of NCDDP-AF suppliers for the project for two years.		
days termir	(after signing of the contract) without valid	reason acceptable to the	rm the services under the contract/PO within 30 ne procuring entity ( DSWD), the contract may be ntity (HOPE); the procuring entity shall proceed to ass.
viii. <b>Li</b> terms	quidated damages/penalty: In case of fa a penalty of one percent of the undelivere	ilure to make the full de ed cost for every day of	elivery within the time specified in the delivery delay shall be imposed.
	on can be obtained from: DSWD Field cor. Gen. Maxilom Ave., Cebu City	Office VII- Kalahi C	IDSS Office
Telep	hone (032) 233-8785; 233-0	261: 231-2172 local	17126
1	il Address : kalahiaf7.procuremer		
	y fax / e-mail the receipt of this reques		you will submit the price quotefice (-)
T (#)	That the lipoeipt of this reques	cand whether of 110ty	you wiii submit the price quotation(s).
Sincerely yours,	MANUEL NI. EDLES		
Head, Procuremen	nt Management Section	(S	ignature over printed name)
Contact #: (032) 233-8	3785; 233-0261; 231-2172 local 17126	•	Supplier

Annex A

#### DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

RFQ No.

Date:

2024-0124 KC-FO7
September 25, 2024

Company Name:	No. 200
Company Address:	
TAX ID No.:	
Contact Person :	
Contact No. :	

tem No.	Qty	Unit	Purchaser's Specifications	Supplier/Service Provider's Specifications (Please write the detailed specifications in the space provided)	Unit Cost	Total Cost
			Provision of Catering Services (2 Meal and 2 Snacks)			
1	ž.		Activity Title: Community Volunteers Culminating Activity: Harvesting the Gains through Community-Driven Development (1 day)			
1	186	pax	Date: November 6, 2024			
			Venue: Sagbayan, Bohol Meals: Lunch and Dinner (Buffet) Snacks: AM & PM (Packed)			
			Lunch and Dinner Menu:  > Rice  > 2 Main Dish: (Choices of: Beef / Pork / Chicken or Fish)  > Dessert (Choices of: Fruits or Cakes or Salads)  > Drinks: (Choices of: at least 500 ml Bottled Water or 240ml Canned Juice or 330ml Bottled Natural Juice)  No serving of CREAMDORY fish No serving of BAM-E, PANSIT or BIHON (as viand)  Strictly NO SOFTDRINKS & FLAVORED BOTTLED DRINKS / POWDERED JUICES  * Please specify name of dishes			
	1. 2.		AM / PM Snacks:  > Variation of Pasta, Noodles, Pastries, 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 : (Choices of: at least 500 ml Bottled Water or 240ml Canned Juice or 330ml Bottled Natural Juice or Coffee/hot Choco) Strictly NO SOFTDRINKS & FLAVORED BOTTLED DRINKS  * Please specify name of dishes			
			Other Specifications:  > Service provider must attached MENU upon submission of Request for Quotation (RFQ).  > Food must be delivered between 9:00AM to 11:00AM (Lunch) & 3:00PM to 5:00PM (Dinner).  > Service provider must bring the Delivery Receipt, Sales Invoice or Billing Statement and Menu upon delivery to fast track the processing of payments.  > Service provider must inform the End-user ahead of time for any changes in the menu prior to the delivery.  > End-user will inform the service provider at least three (3) days prior to the conduct of meeting. (approved Menu.)			
	1		Eligibility Requirements:  1. Mayor's/Business Permit  2. Security and Exchange Commission Certificate (SEC/Department of Trade and Industry Certificate (DTI)/Cooperative Development Authority Certificate(CDA)			
		DDP AF	XXXX page 1 of 1 XXXX			

PR No.

2024-0124 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.

EDLYN'S. CANGQUE

(Signature over printed name)

Canvasser

Contact #: +63-977-121-7434

(Signature over printed name) Supplier

Company Name:	
4 130	

## Activity Title:

# Community Volunteers Culminating Activity:

### Harvesting the Grains through Community-Driven Development (1 day)

## **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.):	PM Snacks: (Variation of Pasta, Noodles, Native Kakanin, i.e, Suman/Puto/Bikc 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	Drinks: 500ml Bottled Water
or 330ml Bottled Natural Juice i.e.: (Lemon/Calamansi/Buko/Cucumber etc.)	or 330ml Bottled Natural Juice i.e.:
(specify)	(Lemon/Calamansi/Buko/Cucumber etc.) (specify)
or 240ml Canned Juice:	or 240ml Canned Juice:
(specify)	(specify)
or Coffee/Hot Choco:	or Coffee/Hot Choco:
(specify)	(specify)
Lunch: Plain Rice	Dinner: Plain Rice
2 Main Dish: (Choices of Beef; Pork; Chicken/ Fish):	2 Main Dish: (Choices of Beef; Pork; Chicken/ Fish):
(specify) 1.	(specify) 1
(specify) 2	(specify) 2.
Dessert: (Choices of: Fruits or Cakes or Salads)	Dessert: (Choices or Fruits or Cakes or Salads)
(specify)	(specify)
Drinks: 330ml Bottled Natural Juice i.e.:	Drinks: 330ml Bottled Natural Juice i.e.:
(Lemon/Calamansi/Buko/Cucumber etc.)	(Lemon/Calamansi/Buko/Cucumber etc.)
or 240ml Canned Juice:	(specify)
(specify)	or 240ml Canned Juice:
or 500ml Bottled Water	(specify) or 500ml Bottled Water