#### DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

KALAHI-CIDSS NATIONAL COMMUNITY DRIVEN DEVELOPMENT PROJECT

Field Office VII MJ Cuenco Avenue, Cebu City

### **REQUEST FOR QUOTATION OF GOODS SHOPPING**

Telephone No. 233-0261

Date of Request:	September 25, 2024	RFQ No.	2024-0130 KC-FO7		
Company name:					
Address:		<del></del>			
Contact Person:	4.28	<del>-</del> . ≟			
Contact Number:	·				
Sir/Madam: _					
	mmunity Driven Development Project - Add olowing items in Annex A:	litional Financing (NCDD	P-AF) hereby requests you to submit price		
To assist you quantities.	ou in the prepartion of your price quotation,	we enclose the necessa	ry technical specifications and required		
	for any or more items under this request. E providers offering the lowest evaluated pri		ed and contract awarded separately to the		
	Basis X Total Quoted		Lot Basis		
catalogue(s) and o	n duplicate and in the English language, sh ther printed materials or pertinent informati e provider(s) providing after sales service fa	on in English for each ite	m quoted, including names and addresses of		
4. The deadline for September 27, 20	receipt of your quotation (s) by the KC-NC 24 at 3:00 PM.	DDP-AF at the address i	ndicated in the Paragraph 6 is:		
5. Your quotation(s following:	s) should be submitted as per the following	instruction and in accord	ance with the Terms and Conditions including th		
a. Prices:	The prices should be quoted for the Custo	mized Conference Kit a	and Customized Advocacy Umbrella.		
b. Evalua	tion of Quotations: Offers determined to h	e substantially responsiv	ve to the technical specifications will be evaluate		
	rison of their prices. In evaluating the quota				
	nere there is a discrepancy between the an	nounts in figures and in w	ords, the amount in words will govern;		
	here there is a discrepancy between the ur quantity, the unit rate as quoted will govern		total resulting from multiplying the unit rate by		
🦸 iii. it	a Supplier refuses to accept the correction	, his quotation will be rej	ected.		
2	In addition to the quoted price, the evaluated price shall include Value Added Tax and other necessary taxe as specified herein.				
	Award of Purchase Order: The award will nrical and financial requirements.	be made to the bidder of	fering the lowest evaluated price that meets the		
v. V	alidity of the Offer: Your quotation(s) should be aligned in the paragraph of quotation(s) indicated in the paragraph	uld be valid for a period on the state of this Request for Co	of sixty (60) calendar days from the deadline for Quotation.		
of a	f the supplier/service provider withdraw y contract when and if awarded, then the su pliers for the project for two years.	our quotation during the oplier(s)/ service provide	validity period and/or refuse to accept the award r(s) will be excluded from the list of NCDDP-AF		
day tem	s (after signing of the contract) without valid	d reason acceptable to the head of the procuring e	rm the services under the contract/PO within 30 ne procuring entity ( DSWD), the contract may be ntity (HOPE); the procuring entity shall proceed tass.		
viii. tern	Liquidated damages/penalty: In case of the instance of the second percent of the undelive	ailure to make the full de red cost for every day of	livery within the time specified in the delivery delay shall be imposed.		
	ation can be obtained from: DSWD Fiele. cor. Gen. Maxilom Ave., Cebu City	d Office VII- Kalahi C	IDSS Office		
		0261; 231-2172 local	17126		
	nail Address : <u>kalahiaf7.procureme</u>				
7. Please confirm	by fax / e-mail the receipt of this reque	st and whether or not y	ou will submit the price quotation(s).		
Sincerely yours	1 a //				
1	In (la)				
	My Y				
ENGR. E	MANUEL M. EDLES	2000	<u> </u>		
	nert Management Section 3-8785; 233-0261; 231-2172 local 17126	(S	ignature over printed name)		
Juliaci #. (032) 23	0-0/03,230,0201, 231-21/2 local 1/126		Supplier		

#### DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Annex A

RFQ No. 2024-0130 KC-FO7

Date: September 25, 2024

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

Item				Supplier/Service Provider's Specifications		
No.	Qty	Unit	Purchaser's Specifications	(Please write the detailed specifications in	Unit Cost	<b>Total Cost</b>
-				the space provided)		
			Name of Activity: Kalahi-CIDSS Program Year-End Liquidation			
			Workshop and Culmination Activity			
1			Date: November 20-22, 2024			
			Venue: within Metro cebu			
			Specifications:			
			Provision of customized conference kit with the following			
į			items:			
	/31		*Customized Ballpen			
-			*Customized 100 leaves Notebook			
1			*Customized canvass cloth Tote bag			
1			• Dimensions: 16" x 14 1/2" x 5"			
	400		Weight limit: 30lbs (13.6 kg)			
1	400	set	• 1" wide dual straps, 24 1/2" length	ti .		
-	19		Open main compartment			
1			Bag width 16 inches			*
			Bag height 14 1/2 inches			
1			Bag depth 5 inches			
į			Strap length 24 1/2 inches			
-			Strap width 1 inch			
			Please see attached design			
			Provision of customized advocacy umbrella with full			
2	435	piece	sublimation print			
	12	piece				
			Please see attached design			
			Note:			
			* Must be delivered 3 days before the activity  * Supplier must submit sample finish product within 3 days upon receipt of			
			approved PO before mass production			
	- 12					
	- 10 - 3x		Eligibility Requirements:	×		
	15		1. Mayor's/Business Permit			
	7		2. Security and Exchange Commission Certificate (SEC/Department of Trade	-		
	ľ		and Industry Certificate (DTI)/Cooperative Development Authority Certificate(CDA)	l'		
			XXXXXXXX			
		DDP AF Fun	ds	Santa a		
d Use	er: KC-NCE	DDP AF		Total		

PURPOSE	:
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For the participants of Kalahi-CIDSS Program Year-End Liquidation Workshop and Culminating Activity

PR No.

2024-0130 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

Contact #: +63-977-121-7434

(Signature over printed name)

Supplier



# Specifications:

• Dimensions: 16" x 14 ½" x 5"

Weight limit: 30lbs (13.6 kg)1" wide dual straps, 24 1/2" length

Open main compartment

## Size guide

Bag width (inches)	16
Bag height (inches)	14 ½
Bag depth (inches)	5
Strap length (inches)	24 1/2
Strap width (inches)	1





