

REQUEST FOR QUOTATION
SHOPPING

RFQ No. : DSWD7-2021-1204
Date : October 11, 2021

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/s a duly notarized certification to this effect.

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

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 **October 18, 2021 at 5:00pm.**

Very truly yours,


ROSARIO P. BACONG
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 within 30 days calendar from receipt and conformity of Purchase Order.
- Place of Delivery: **DSWD Field Office VII, Carreta, Cebu City**
- Terms of Payment: **within 30 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: _____


JOSELITO TABILON
Canvasser

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

(Signature over Printed Name of Supplier /
Authorized Representative)



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office VII, Cebu City

RFQ No.: DSWD7-2021-1204Date: October 11, 2021

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Company Address _____

Contact Person _____

Contact No. _____

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Item No.	Qty.	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	28	bot	B1, B2, B6, B12 Calcium and Ascorbic Acid (Vit. C) 500 mg, 60 tablet/bot.				
2	300	box	Surgical Mask, 3-ply, N88, Ear Loop, 50 pcs/box				
3	300	pcs	Face Shield, Protective Eyeglasses Face Shield				
4	300	pcs	Hand Sanitizer Spray, Hand Sanitizer, Liquid/Gel, 500 ml				
5	300	bot	Hand Sanitizer Spray, 100 ml with Alcohol 70-75%				

			Total:				

Approved Budget for the Contract: **Php 167,500.00**

End User:

ARRS

Purpose :

For the use of ARRS and SWAD Offices Social Workers/Staff

Note: "Bidder's Specifications" column may be filled up with supplier's offer (brand, model, origin) or may copy "Articles/Description" stated if applicable.

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

JOSELITO TABILON

Canvasser

Signature of Supplier / Authorized Representative
Over Printed Name