

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. | DSWD7-2022-1868 |
|---|--|---------------------|---|
| | | Date | November 24, 2022 |
| Company Name | | | |
| Company Address | | | |
| Contact Person | · | - | |
| Contact No. | | T | |
| PhilGEPS Registrat | ion No.: | - | |
| Sir/Madam: | | | |
| er periodo ioi dio gi | government price/s including delivery charge oods listed in Annex A. Failure to indicate in h descriptive brochures, catalogues, literatures | formation could | ha tha hasis for a second second |
| If you are the exclusion your quotation a co | sive manufacturer, distributor or agent in the P luly notarized certification to this effect. | hilippines for the | goods listed in Annex A, please attach |
| Interested service p Registration Numb | providers are required to submit true copies er upon submission of quotation. | of their valid N | Mayor's/Business Permit & Philgeps |
| | and submit this form together with Annex A u City or send it through facsimile numbers (03 vd.gov.ph on or before November 28, 2022 at | 11 144 X / X K · 72 | nation to the BAC Secretariat, DSWD 3-0261; 231-2172 local 140 or 148 or e- |
| | | Very truly yours, | |
| | | _0 | |
| | | ENGR. EMMAN | UEL M. EDLES |
| Terms and Condition | | AO V/Head, Prod | curement Management Section |
| 1. Award shall be ma | 110. | | ot basis |
| 3. Good/s or Service 4. Place of Delivery: | s shall be delivered within 30 days calendar f | rom receipt and | conformity of Purchase Order. |
| Terms of Payment | within 30 days from the receipt of billing s | statement | |
| 6. Liquidated Damag 7. In case of discrepa | es/Penalty: One-tenth of one percent for e ancy between total price per item and unit price uantity of that item, the latter shall prevail. | veryday of dele | <u>/ shall be imposed.</u> extended or |
| B. Warranty period, if | applicable: | | |
| | | B | onapant Dall |
| | | BON | NAPARTE D. CASEÑAS II |
| om interested to | | | Canvasser |
| am interested to quo | ete and agree to the terms and conditions. | | |
| (Signature over Print | ed Name of Supplier / Service | | |
| Provider / Aut | horized Representative) | | |

(page 1 of 2)

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|--------------|-----------------|-------------|--------|
| Department o | FSocial Welford | e and Deval | opment |
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DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office VII, Cebu City

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|-------------|-------------|------------------------|--|--|----------------------------|-----------|-------------------|
| Comp | any Addres | is | | | | Date: | November 24, 2022 |
| Conta | ct Person | | | | | | , |
| Conta | ict No. | | No. of the second secon | _ | | | |
| PhilGl | EPS Regist | ration No.: | | | | | |
| Tin No | ımber: | | | | | | |
| Item No. | Quantity | Unit of Measure | Articles / Descriptions | Statement of Compliance (State "Comply" or "Not Comply" | Bidder's Specifications | Unit Cost | Total Cost |
| | | | Supply and Delivery of the following: | | | | |
| 1 | 625 | piece | Expanding Plastic Envelope with Handle & Zipper, Long | | | | |
| 2 | 20 | box | Carbonless continuous paper (3ply), 11x9 1/2, 500 sets per box | | | | |
| Tota | al: | | | | | | |
| Appro | ved Budg | et for the | Contract: Php 66,000.00 | Note: | | | |
| End User: | | Social Pension Program | | "Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable. | | | |
| PURP | OSE : | For S | Social Pension Program Use. | | | | |

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

Bohapant DCH BONAPARTE D. CASEÑAS II Canvasser

Signature of Supplier / Authorized Representative Over Printed Name

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