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 14, 2023	RFQ No.	2023-0342 KC-F07
Company name:			
Address:			
Contact Person:	(
Contact Number:			
Sir/Madam:			
quotations for the	ommunity Driven Development Project - Addition following items in Annex A:		
To assist y	ou in the prepartion of your price quotation, we	enclose the necessar	y technical specifications and required quantities.
supplier(s)/ service	for any or more items under this request. Each providers offering the lowest evaluated price or	item shall be evaluaten per;	ed and contract awarded separately to the
	n Basis X Total Quoted		Lot Basis
catalogue(s) and o supplier(s) / servic	in duplicate and in the English language, should ther printed materials or pertinent information in e provider(s) providing after sales service facilitie	English for each iter es in the Philippines.	n quoted, including names and addresses of
4. The deadline for September 21, 20	receipt of your quotation (s) by the KC-NCDDF 123, 4:00 pm.	P-AF at the address in	ndicated in the Paragraph 6 is:
Your quotation(s following:	s) should be submitted as per the following instr	uction and in accorda	ance with the Terms and Conditions including the
a. Prices: printer to	The prices should be quoted for Supply and Dobe delivered in DSWD FO VII, Cebu City.	elivery of Toner car	tridge supplies to be used for KC-NCDDP
by compa	tion of Quotations: Offers determined to be sul rison of their prices. In evaluating the quotations here there is a discrepancy between the amount	, the Purchaser will a	to the technical specifications will be evaluated adjust any arithmetical errors as follows:
ii. w	here there is a discrepancy between the unit rat quantity, the unit rate as quoted will govern;		
	a Supplier refuses to accept the correction, his	quotation will be reie	cted.
	n addition to the quoted price, the evaluated		Value Added Tax and other necessary taxes
iv. A tech	ward of Purchase Order: The award will be m nical and financial requirements.	nade to the bidder offe	ering the lowest evaluated price that meets the
v. V	alidity of the Offer: Your quotation(s) should be ipt of quotation(s) indicated in the paragraph 4 o	e valid for a period of of this Request for Qu	sixty (60) calendar days from the deadline for lotation.
of a	the supplier/service provider withdraw your of contract when and if awarded, then the supplier officers for the project for two years.	uotation during the v (s)/ service provider(s	ralidity period and/or refuse to accept the award s) will be excluded from the list of NCDDP-AF
term	f the supplier/service provider does not start to s (after signing of the contract) without valid reast inated through a notice to be issued by the head to tate with the succeeding responsive supplier/s	son acceptable to the d of the procuring ent	procuring entity (DSWD), the contract may be ity (HOPE); the procuring entity shall proceed to
viii. I term	iquidated damages/penalty: In case of failure s, a penalty of one percent of the undelivered co	e to make the full deli	very within the time specified in the delivery play shall be imposed.
6. Further informa	tion can be obtained from: DSWD Field Off cor. Gen. Maxilom Ave., Cebu City	ice VII- Kalahi CID	SS Office
	phone : (032) 233-8785; 233-0261 ail Address : <u>kalahiaf7.procurement2</u> 3		7126
7. Please confirm	by fax / e-mail the receipt of this request and		I will Submit the price quotation(s)
Sincerely yours,		- manufact of floory of	will easifie the price quotation(s).
, jours,			
	MANUEL M. EDLES		
	ent Management Section &	(Sign	nature over printed name)
Contact #: (032) 233-	8785; 233-0261; 231-2172 local 17126		Supplier

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Annex A

RFQ No. **2023-0342 KC-F07** Date: **September 14, 2023**

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

Item No.	Qty	Unit	Purchaser's Specifications	Supplier/Service Provider's Specifications (Please write the detailed specifications in the space provided)	Unit Cost	Total Cost
1	60	toner	Toner for HP LaserJet MFP M236sdw, OEM		ļ.	
2	20	cartridge	INK Cartridge, HP Deskjet, (HP680), Black, OEM			
3	120	set	Ink for HP Inkjet 615 Printer, black, cyan, magenta, yellow, OEM			
4	60	bottle	Ink for HP Inkjet 615 Printer, black, OEM			
5	40	cartridge	Toner for HP Color Laserjet PRO M155A, OEM			
6	50	cartridge	Brother Toner for DCP L2540DW, OEM			
7	206	cartridge	Ink Cartridge for Brother MFC-J3540DW, LC462BK (black), OEM			
8	100	cartridge	Ink Cartridge for Brother MFC-J3540DW, LC462C (cyan), OEM	-		
9	100	cartridge	Ink Cartridge for Brother MFC-J3540DW, LC462M (magenta), OEM			
10 1	100	cartridge	Ink Cartridge for Brother MFC-J3540DW, LC462Y (yellow), OEM			
			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)			
hava	to VC A	F Franks	XXXX page 1 of 1 XXXX			
	to: KC-Al			Total		

PURPOSE:	Toner cartridge supplies to be used for KC-NCDDP p	rinter

2023-0342 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.

(Signature over printed name)

(Signature over printed name) Supplier

Contact #: +63-977-121-7434