



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. : DSWD7-2023-0392
Date : March 30, 2023

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 a duly notarized certification to this effect.

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

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 **April 3, 2023 at 5:00PM.**

Very truly yours,


ENGR. EMMANUEL M. EDLES
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 15 days calendar from receipt and conformity of Purchase Order.**
- Place of Delivery: **DSWD FO VII, Corner M.J. Cuenco Avenue and Gen. Maxilom Ext., Carreta, Cebu City**
- Terms of Payment: **within 30 days from the receipt of billing statement.**
- 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: _____


BONAPARTE D. CASEÑAS II
Cavasser

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

(Signature over Printed Name of Supplier / Service
Provider / Authorized Representative)



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Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	300	pack	<p align="center">Supply and Delivery of Hygiene kit</p> <p>Hygiene Kit for 300 children in street situations composed of the following items:</p> <ul style="list-style-type: none"> * Batch soap 125g - 1 piece * Shampoo sachet 15ml/sachet - 12 sackets * Kiddie Toothbrush - 1 piece * Alcohol 70% ethyl 250ml/bottle - 1 bottle * Toothpaste 50ml/tube - 1 tube * Disposable Face Mask, N88 25 pcs/pack - 1 pack * Tissue Paper twin pack - 2-ply individually pack - 1 pack * Cotton buds 50 tips/pack - 1 pack * Face Towel, 12" x 12" cotton - 1 piece * Plastic Comb, medium size - 1 piece * Cologne 50ml/bottle - 1 bottle <p>Note: All items per kit are packed in a small size eco bag (very strong and high durability)</p>				
Total:							
Approved Budget for the Contract: Php 150,000.00				<p>Note: "Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable.</p>			
End User:		Compre Program					
PURPOSE : For Distribution to Children in street situations							

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

BONAPARTE D. CASEÑAS II
 Canvasser

Signature of Supplier / Authorized Representative
Over Printed Name