

DSWD DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Department of Social Welfare and Development Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

REQUEST FOR QUOTATION SHOPPING

			RFQ No.	: DSWD7-2021- 0848
Company Name			Date	: July 8, 2021
Company Address				
Contact Person	:	2.64 (Q4)		
Contact No.	:	3		
	:	<u> </u>		
PhilGEPS Registratio	n No.:			
Sir/Madam:		N.		
Please quote your go expenses for the good kindly furnish us with o	vernment price/s including de ls listed in Annex A. Failure to descriptive brochures, catalog	livery charges, VAT o indicate informatio	or other app	plicable taxes, and other incidental ne basis for non-compliance. Also,
if you are the exclusive	re manufacturer, distributor or n/s a duly notarized certification	283	or samples, pines for the	if applicable. goods listed in Annex A , please
Interested supplier/s a Number upon submiss	are required to submit true	on to this effect. Copies of their vali	d Mayor's F	Permit & Philgeps Registration
Please accomplish an	d submit the			S i migeps Registration
DSWD Field Office VI 140 or 148 or e-mail to	d submit this form together I, Cebu City or send it throug bac.fo7@dswd.gov.ph on or l	with Annex A and gh facsimile numbe pefore July 14, 202	d Bank Info rs (032) 233 1 at 5:00pm.	rmation to the BAC Secretariat, -8785; 233-0261 ; 231-2172 local
				i i
			Very truly	ours,
				Mys
		á	ROSARIO, I	P. BACONG L
Terms and Conditions		ĝ	AO V/Head,	Procurement Management Section
 Award shall be made Quotation validity sha 	Il be not less than 60 calenda	v total quoted pr		basis
Good/s or Services sl	nall be delivered within 30 day	o colorata s		
Place of Delivery: Terms of Payments	nall be delivered within 30 day DSWD Field Office VII, Brgy (S calendar from rec Caretra, Cebu City	eipt and cor	nformity of Purchase Order.
6 Liquidated Damages (within 30 calendar days from	n the receipt of Bil	ling Stateme	ent / Sales Invoice
6. Liquidated Damages/	Penalty: One-tenth of one	percent for every	lay of delay	shall be imposed.
by the quantity of that	between total price per item item, the latter shall prevail	and unit price for th	e item as ext	tended or multiplied
8. Warranty Period, if ap	item, the latter shall prevail.			or maniphed
arranty r enou, ir ap	pilcable:	(B)	۸. /	
			W.	
I am interested to such			LEIF	Canvasser
r am interested to quote a	and agree to the terms and co	nditions.		Canvasser
(Signature over	Printed Name of Supplier /			
Authoriz	ed Representative)			
	· ·	age 1 of 2		

Company Name Company Address Contact Person Contact No.



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		RFQ No.: Date:	DSWD7-2021- 0848 July 8, 2021
	17. 26. 26.		
	Sign S		

No.	Qty.	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Co
1 2	100	cart	TONER FOR PANTUM M6600NW, OEM of COMPATIBLE	r			
	100	*	* Laser Toner * Laser Toner * Toner Type: Compatible * Print Output: Black Toner * Technology: Laser * Page Yield: at least 2,500 pages * Free use of brand new print/scan/copy printer for every 10 ISO certified toners Warranty: Should be free from defects in materials and workmanship; unit replacement Box Content: Toner Cartridges and recycling guide Service provider must replace/repair any defective printers, free of charge Provider must have a supprot center within Metro Cebu				
1		T(OTAL:				

Purpose: For use in CIS office applicable.

Canvasser

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

Signature of Supplier / Authorized Representative Over Printed Name

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