



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. : DSWD7-2023-1293
 Date : September 21, 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 **September 25, 2023 at 5:00PM.**

Very truly yours,


ENGR. EMMANUEL M. EDLES
 AO V/Head, Procurement Management Section

Terms and Conditions:

1. Award shall be made on per: item basis total quoted price lot basis
2. Quotation validity shall be not less than **60 calendar days.**
3. Good/s or Services shall be delivered **within 30 days calendar from receipt and conformity of Purchase Order.**
4. Place of Delivery: **DSWD Field Office VII, Carreta, Cebu City**
5. Terms of Payment: **within 30 days from the receipt of billing statement.**
6. Liquidated Damages/Penalty: **One-tenth of one percent for everyday of delay shall be imposed.**
7. 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.
8. Warranty period, if applicable: _____


BONAPARTE D. CASEÑAS II
 Cashvasser

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

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



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
Field Office VII, Cebu City

Company Name _____
Company Address _____
Contact Person _____
Contact No. _____
PhilGEPS Registration No.: _____
Tin Number: _____

RFQ No. **DSWD7-2023-1293**
Date: **September 21, 2023**

Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	15	unit	Supply and Delivery of Laser Printer (Multifunction)				
			Specifications: <ul style="list-style-type: none"> • Laser Printer 3 in 1 Monochrome • Function: Print, Copy and Scan • Monthly Duty Cycle: up to 80,000 pages Copying • Copy Speed: Up to 40 cpm • Print Solution: Fine Lines (1200 x 1200 dpi) scanning • Optical Resolution up to 1200 x 1200 dp • Scan Size Max: (ADF): 216 x 356 mm • File Format Supported: PDF, JPG, TIFF Document and Media Handling • Document Feeder Sheet Capacity: >50 sheets PC Connectivity • Connection: 1 Hi-Speed USB 2.0; 1 rear host USB; 1 front USB port; Gigabit Ethernet 10/100/1000BASE-T network; 802.3az(EEE) Warranty: 1-year Hardware Warranty 				
Approved Budget for the Contract: Php 742,500.00				Note: "Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable.			
End User: PANTAWID							
PURPOSE : To be use in Pantawid Cebu Cluster III Office, Cebu City, Lapu Lapu City, Balamban, Cebu Cluster II Office, Toledo City, Carcar City. Naga and Cebu Cluster I Office, Barili, Dumanjug Dalaguete and Badian.							

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

Bonaparte DCU
BONAPARTE D. CASEÑAS II
Canvasser

Signature of Supplier / Authorized Representative
Over Printed Name