

07050-5



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
Field Office VII
Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

**REQUEST FOR QUOTATION
NP- SMALL VALUE PROCUREMENT**

RFQ No. : DSWD7-2022-1122
Date : June 24, 2022

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 and Philgeps Registration Number upon submission of quotation. An Omnibus Sworn Statement shall be required prior to award.

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 17126 or kc.af7.procurement@gmail.com on or before **July 1, 2022 at 10:00AM.**

Very truly yours,

ROSARIO P. BACONG
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 done **on the specific dates in Annex A.**
- Place of Delivery: Dimiao, Bohol
- Terms of Payment: within 30 calendar days from the completion of services and receipt of Billing Statement / Sales Invoice.
- 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: _____

EDLYN S. CANGQUE
Canvasser

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

(Signature over Printed Name of Supplier /
Authorized Representative)



Company Name: _____

RFQ No.: DSWD7-2022-1122

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Date: June 24, 2022

Contact Person: _____

Contact No.: _____

PhilGEPS Registration No.: _____

Item No.	Qty	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
			Provision of Catering Services 1 Meal and 2 Snacks				
1	81	pax	Title of Activity : Municipal Fiduciary Review Date : September 07, 2022				
2	130	pax	Title of Activity : MDRRMC Meeting cum Municipal Accountability Reporting Date : November 10, 2022				
			Venue : Dimiao, Bohol Meals : Lunch (Packed) Snacks : AM & PM (Packed) Lunch Menu: > Rice > 2 Main Dish : (Choices of: Beef / Pork / Chicken or Fish) > 1 Main Dish : Vegetables > Dessert (Choices of: Fruits or Cakes or Salads) > Drinks : (Choices of: at least 500 ml Bottled Water and 240ml Canned Juice or 330ml Bottled Natural Juice i.e. Lemon/Calamansi/Buko/Cucumber etc.) No serving of CREAMDORY fish No serving of BAM-E, PANSIT or BIHON (as viand) Strictly NO SOFTDRINKS & FLAVORED BOTTLED DRINKS/POWDERED JUICES AM / PM Snacks: > Variation of Pasta, Noodles, Pastries, Native Kakanin, Sandwiches, i.e. Tuna/Ham & Cheese/Egg with vegetables, etc. or Burgers i.e. Beef/Chicken/Ham with vegetables, etc. > Drinks : (Choices of: at least 500 ml Bottled Water and 240ml Canned Juice or 330ml Bottled Natural Juice i.e. Lemon/Calamansi/Buko/Cucumber etc. or Coffee/Hot Choco) Strictly NO SOFTDRINKS & FLAVORED BOTTLED DRINKS/POWDERED JUICES *Please specify name of Dishes Other Specifications: > Service provider must attached MENU upon submission of Request for Quotation (RFQ). > Food must be delivered between 9:00 AM to 11:00 AM. > Service provider must bring the Delivery Receipt, Sales Invoice or Billing Statement and Menu upon delivery to fast track the processing of payments. > Service provider must inform the End-user ahead of time for any changes in the menu prior to the delivery. > End-user will inform the service provider at least three (3) days prior to the conduct of meeting.				
Approved Budget for the Contract: Php84,400.00				Note: "Bidder's Specifications" column may be filled up with supplier's offer (brand, model, origin) or may copy "Articles/Description" stated if applicable.			
End User: KC-NCDDP AF							
Purpose : Provision of food for the participants of the activity.							

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

Signature of supplier/Authorized Representative over
printed name

EDLYN S. CANGQUE
Canvasser

Company Name: _____

Activity Title: **Municipal Fiduciary Review**

MENU

AM Snacks: (Variation of Pasta, Noodles, Native Kakanin, Sandwiches, i.e., Tuna/Ham/Cheese/Egg with Vegetables, etc. or Burger i.e., Beef/Chicken/Ham with Vegetables, etc.):

(specify): _____

Drinks: 500ml Bottled Water and
 330ml Bottled Natural Juice i.e.:
(Lemon/Calamansi/Buko/Cucumber etc.)

(specify): _____

or 240ml Canned Juice:

(specify): _____

or Coffee/Hot Choco: (Please underline your choice)

Lunch: Plain Rice

2 Main Dish (Choices of: Beef; Pork; Chicken/Fish):

(specify) 1: _____

(specify) 2: _____

1 Main Dish (Vegetables):

(specify): _____

Dessert (Choices of: Fruits or Cakes or Salads)

(specify): _____

Drinks: 330ml Bottled Natural Juice i.e.:
(Lemon/Calamansi/Buko/Cucumber etc.)

(specify): _____

or 240ml Canned Juice:

(specify): _____

and 500ml Bottled Water

PM Snacks: (Variation of Pasta, Noodles, Native Kakanin, Sandwiches, i.e., Tuna/Ham/Cheese/Egg with Vegetables, etc. or Burger i.e., Beef/Chicken/Ham with Vegetables, etc.):

(specify): _____

Drinks: 500ml Bottled Water and
 330ml Bottled Natural Juice i.e.:
(Lemon/Calamansi/Buko/Cucumber etc.)

(specify): _____

or 240ml Canned Juice:

(specify): _____

or Coffee/Hot Choco: (Please underline your choice)

Activity Title: **MDRRMC Meeting cum Municipal Accountability Reporting**

MENU

AM Snacks: (Variation of Pasta, Noodles, Native Kakanin, Sandwiches, i.e., Tuna/Ham/Cheese/Egg with Vegetables, etc. or Burger i.e., Beef/Chicken/Ham with Vegetables, etc.):

(specify): _____

Drinks: 500ml Bottled Water and
 330ml Bottled Natural Juice i.e.:
(Lemon/Calamansi/Buko/Cucumber etc.)

(specify): _____

or 240ml Canned Juice:

(specify): _____

or Coffee/Hot Choco: (Please underline your choice)

Lunch: Plain Rice

2 Main Dish (Choices of: Beef; Pork; Chicken/Fish):

(specify) 1: _____

(specify) 2: _____

1 Main Dish (Vegetables):

(specify): _____

Dessert (Choices of: Fruits or Cakes or Salads)

(specify): _____

Drinks: 330ml Bottled Natural Juice i.e.:
(Lemon/Calamansi/Buko/Cucumber etc.)

(specify): _____

or 240ml Canned Juice:

(specify): _____

and 500ml Bottled Water

PM Snacks: (Variation of Pasta, Noodles, Native Kakanin, Sandwiches, i.e., Tuna/Ham/Cheese/Egg with Vegetables, etc. or Burger i.e., Beef/Chicken/Ham with Vegetables, etc.):

(specify): _____

Drinks: 500ml Bottled Water and
 330ml Bottled Natural Juice i.e.:
(Lemon/Calamansi/Buko/Cucumber etc.)

(specify): _____

or 240ml Canned Juice:

(specify): _____

or Coffee/Hot Choco: (Please underline your choice)

(Signature over Printed Name of Supplier/
Authorized Representative)