

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.	: DSWD7-2024-0157
		Date	: February 26, 2024
Company Name :			
Company Address :			
Contact Person :			
Contact No. :			
PhilGEPS Registration No.:			
Sir/Madam:			
avenage for the goods liste	ent price/s including delivery charge ed in Annex A. Failure to indicate in tive brochures, catalogues, literatures	rormation could	er applicable taxes, and other incidental be the basis for non-compliance. Also, s, if applicable.
in your quotation a duly notar	rized certification to this effect.		e goods listed in Annex A, please attach
Interested supplier/s are requipon submission of quotation	quired to submit true copies of their n/s. An omnibus Sworn Statement i	valid Mayor's s required prior	Permit, Philgeps Registration Numbe to award.
Field Office VII. Cebu City or	mit this form together with Annex A r send it through facsimile numbers (0 th on or before March 1, 2024 at 5:00	32) 233-8785; 4	ormation to the BAC Secretariat, DSWI 233-0261; 231-2172 local 140 or 148 or e
		Very truly you	rs. 🔨
		((
		3	AND A EDIES
			ANUEL M. EDLES Procurement Management Section
Terms and Conditions:		AU Vineau, F) Management Scotter
Award shall be made on p		oted price	let basis
Quotation validity shall be	not less than <u>60 calendar days.</u>	- Eint s	and conformity of P.O.
3. Good/s or Services shall I	be delivered within 30 days calendar	r from receipt a	Aprilom Ext. Carreta Cebu City
	VD FO VII, Corner M.J. Cuenco Aver		MAXITOTII EXE., Garretta, Geba Gity
5. Terms of Payment: With	in 30 days from the receipt of billing alty: One-tenth of one percent for	everyday of de	elay shall be imposed.
7. In case of discrepancy be	etween total price per item and unit pri of that item, the latter shall prevail.	ce for the item a	as extended or
8. Warranty period, if applica	able:	<u> </u>	2. I hot
			Bonsport DCI
		1	BONAPARTE D. CASEÑAS II Canvasser
			Carivasser
I am interested to quote and	d agree to the terms and conditions.		
(Signature over Printed Na	nme of Supplier / Service		

Provider / Authorized Representative)

(page 1 of 2)



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	npany Na					DE0 11	
Company Address Contact Person		dress					DSWD7-2024-0157
		on		_		Date:	February 26, 2024
Con	Contact No.						
Phil	GEPS Reg	gistration	No.:	_			
	Number:			-			
			T T				
Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply"	Bidder's Specifications	Unit Cost	Total Cost
1	1	license	Subscription of SIP Trunk				
			Coverage: Start upon expiration of the existing subscription and will end for a duration of 1 year.				
			Number of Sessions/Lines: at least 10				
			Inclusions:				
			Managed Router				
			IPVPN: At least 2MB (Zero Rated)				
			Must be integrable with 3CX Unified Communication				
			Service Availability: at least 99.6%				

"Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable. Use in 3CX Unified Communication Platform for voice calls PURPOSE :

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

Approved Budget for the Contract: Php 202,160.00

ICTS

End User:

(page 2 of 2)

Note: