

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.	DSWD7-2024-0844A
Company N		L	Date :	July 19, 2024
Company Name : _				v.
Company Address : _				
Contact Person : _	,			
Contact No.				
PhilGEPS Registration N	lo.:			
Sir/Madam:				
Please quote your gove expenses for the goods kindly furnish us with des	rnment price/s including del listed in Annex A. Failure to criptive brochures, catalogue	livery charges, VAT o indicate informati s, literatures and/or	T or other a on could be samples, if	applicable taxes, and other incidental e the basis for non-compliance. Also, f applicable.
If you are the exclusive n in your quotation a duly n	nanufacturer, distributor or ac otarized certification to this ei	gent in the Philippin	es for the g	oods listed in Annex A , please attach
Interested supplier/s are	required to submit true copi tion/s. An omnibus Sworn s			
Please accomplish and s Field Office VII, Cebu City mail to bac.fo7@dswd.gov	ubmit this form together with or send it through facsimile representations, ph on or before July 23, 202	h Annex A and Ba numbers (032) 233- 24 at 5:00PM.	ank Informa 8785; 233-(ation to the BAC Secretariat, DSWD 0261; 231-2172 local 140 or 148 or e-
		Very tru	uly yours,	
		FNCD	ENAMANUE	
Terms and Conditions:		AO V/H	ead Prochu	EL M. EDLES rement Management Section
Award shall be made on		_ /) Section
Quotation validity shall h	per: item basis ✓ e not less than <u>60 calendar o</u>	total quoted price	lot b	pasis
3. Good/s or Services shall	be delivered within 30 days	days.		
4. Place of Delivery: AVF	be delivered within 30 days	calendar from rec	eipt and co	onformity of P.O.
	RC II Camomot Franza Rd., nin 30 days from the receipt			
o. Liquidated Damages/Per	lalty' One-tenth of one me	Andread Anna Control		
In case of discrepancy be multiplied by the quantity	etween total price per item an of that item, the latter shall p	d unit price for the i	tem as exte	<u>hall be imposed.</u> ended or
8. Warranty period, if applic	able:	. Ovan.		
				Heroufiestot
			CHARL A	ALBERT J. TORREFIEL
I am interested to quote and	agree to the I			Canvasser
and	agree to the terms and cond	itions.		, ,
(Signature over D.)				•
(Signature over Printed Nar Provider / Authorized	ne of Supplier / Service I Representative)		•	

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

Con Con	npany Nai npany Add tact Perso tact No. GEPS Re	dress	No.:			RFQ No Date:	DSWD7-2024-0844A July 19, 2024
	Number:			_			
Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply"	Bidder's Specifications	Unit Cost	Total Cost
			Supply and Delivery of Booklets and Record Forms				
1	1	pack	Test of Nonverbal Intelligence Fourth Edition Form A Answer Booklets and Record Forms (50 pcs per pack)				
2	1	pack	Test of Nonverbal Intelligence Fourth Edition Form B Answer Booklets and Record Forms (50 pcs per pack)		7		
3	2	pack	Nonverbal Personality Questionaire Answer Sheet (25 pcs per pack)				
4	2	pack	Nonverbal Personality Questionaire Answer Sheet (25 pcs per pack)				
Approved Budget for the Contract: Php 78,000.00		Note: "Bidder's Specificatio copy "Articles/Descrip	ns" column may b	e filled up wit	h service provider or may		

PURPOSE: For the purchase of answer sheets for psychological tests.

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

CHARL ALBERT J. TORREFIEL
Canvasser

Signature of Supplier / Authorized Representative Over Printed Name

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