

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. : Date :

: DSWD7-2024-1128 : August 22, 2024

Company Name	ŧ
Company Address	:
Contact Person	1
Contact No.	1
PhilGEPS Registrat	ion 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 supplier/s are required to submit true copies of their valid Mayor's Permit, Philgeps Registration Number upon submission of quotation/s. An omnibus Sworn Statement is 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 140 or 148 or e-mail to bac.fo7@dswd.gov.ph on or before August 27, 2024 at 5:00PM.

Very truly yours,

ENGR. EMMANUEL M. EDLES

**Terms and Conditions:** 

1. Award shall be made on per: item basis 🗸 total quoted price tot 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 P.O.

4. Place of Delivery: DSWD FO VII, Corner M.J. Cuenco Avenue and Gen. Maxilom Ext., 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:

CHARL ALBERT J. TORREFIEL Canvasser

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

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

(page 1 of 2)

Procurement Form No. 04-A (Annex A)

**WDSWD** 

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

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

ltem 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 Social Welfare Development Indicators (SWDI) Forms		<u>م</u>		
1	120	ream	Specification:			8	
			4 pages back to back pull black printing				
			A3 size bondpaper 80 gsm white				
			Packed in 500 sheets per ream for delivery				
Аррі	roved Bu	dget for t	he Contract: Php 102,000.00	Note: "Bidder's Specificat	ions" column mau	he filled up y	ith service provider or may
End U	Jser:	PAN	TAWID	copy "Articles/Desc			
PUR	POSE :	For C	Y 2024 distribution of forms in Regio	n VII Panta	wid benef	iciaries.	

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

(page 2 of 2)

Annex A

RFQ No. DSWD7-2024-1128

August 22, 2024

Date:

SWD	Pantawid Pamilyang Pilipino Program
Department of Social Wellace and Devalopment	· · · · · · · · · · · · · · · · · · ·

	Department of Social Welfare and Development
emarks:	
' Ako ay napili na maging bahagi sa pag-susuri na ito ng DSWD-Pantawic	l Pamilyang Pilipin Program.
Alam ko at malinaw sa akin na ang impormasyong aking ibabahagi ay ma	nanatiling kompidensyal.
Bilang pagsunod sa "Data Privacy Act of 2022 o RA 10173", ako ay kusan	a-loob na naabibiaav
pahintulot at/o pinapayagan ang DSWD na kolektahin, panatilihin, gamitir	
impormasyon sa mga kaugnay na ahensya o pribadong institusyon-katul	ad ng personal at sensitibong
impormasyon na nakuha sa "2019 SWDI Assessment".	
Alam ko at naiintindihan ko na malaya akong makibahagi sa pag-susuri n	a ito at maari kong tapusin ang
pakikibahagi dito sa anu mang oras na aking gustuhin."	
Sannibanagi uno sa ana mang oras na aking gustunini.	
	Pangalan at Lagda
	r angalan at Layua

						<b>Press</b>	P DSWD Pantawid Pilipino P	Pamilyang 'rogram
SOCIAL WE	LFA	RE AN	ND DEV	ELOF	MENT I	NDI	CATORS Revised as of A	ugust 2019
Date of Interview:		/	T T	ime Star	ted:		Time Ended:	
Pantawid ID No.:		TTT	-	<b>-</b>			SWDI Index:	
Name of Respondent:				Grante	e Not Gran	ntee	Level of Well-being:	
Components and Ind	licator	.	Level	Code			TIONAL QUESTION:	
I. ECONOMIC SUFFICIENCY	licatora		Level	Coue			ARATION OF ASSETS	
A. Employable Skills Occupational skills of family members aged 18 years or over A.1					Do you have any financial/ economic assets? (Y/N) (i.e. cash, inventory, land, properties, equipment, etc.)			
A.2					_ If yes, fill up tl	ne ma	IIIX DEIOW:	
A.3					Description	Est	imated Value of Asset (in	Php)
A.4						-		
A.5 A.6						-		
A.7						-		
A.8								
A.9								
A.10					Total	Php	)	
B. Employment Working status of family members aged 18 years o	rover	PSOC SMG						_
B.1					Rema	rks:		
B.2								
B.3								
B.4	_					_		
B.5					4			
B.6 B.7								
B.8						_		
B.9								
B.10					-			
C. Income Family monthly per capita the past six months	income	in			1			
D. Social Security Membership or access of f financial institutions	family to	o formal			1			_
II. SOCIAL ADEQUACY				A COLOR				
A. Health					1			
1. Health Condition and Ava Services	ailment	of Health						
a. Availment of family me of accessible health services in the past six	embers	IS						
b. Health condition of fan the past six months					1			_
2. Nutrition					]			
a. Number of meals the f had in a day	amily				]			
<ul> <li>b. Nutritional status of ch years or below</li> </ul>	ildren a	aged 5						_
Name	Age	Weight						
b.1								
b.2	_							
b.3								
b.4 b.5					-			
0.0								



C.

Components and	Level	Code					
II. SOCIAL ADEQUACY			1	######################################			
3. Water and Sanitation		1			Τ		
a. Family's access to s	afe	drink	ing	wate	er		
<ul> <li>b. Family's access to facilities</li> </ul>	sani	itary	toile	et			
c. Most common fam garbage disposal	ily pr	racti	ce o	f			
B. Housing							
1.a Construction materia	ls of	the	root	f			
1.b Construction materia walls			out	er	1		
2. Tenure status of hous	ing u	unit			-		
3. Lighting facility of the	hous	se					
C. Education						•	
1. Functional literacy of members aged 10 ye	fami ars d	ly or ov	/er	-		1	
Name	R	W	С	U	Ν		
1.1							
1.2							5
1.3							
1.4							
1.5				_			
1.6	-						
1.7 1.8	+						
1.9				-			
1.10	+-			-			
2. School enrolment/ at children aged 3-18 ye informal school		in fo	orma				
Name		Sc	hoo	1			
2.1			_				
2.2							
2.3 2.4			_				
2.5				-			
2.6							
2.7							
2.8							
2.9							
D. Role Performance of F		-			- 11		
1. Involvement of family activities	1						
<ol> <li>Ability of parents and discern problems in f solutions</li> </ol>	amil	y an	d ar	s to rive	at		
<ol> <li>Participation of family me widely-recognized people ciations or support groups (Please specify in remained)</li> </ol>	's org	ganiz ne pa	ation st six	s/as	SO-		
E. Family Awareness of Rel	evar	nt So	cial	Iss	ues		
1. Awareness of the rig	hts c	of ch	ildre	en			
2. Awareness of gender-	base	ed vi	olen	се			
3. Awareness of disaste				-			
reduction and manac	ieme	ant					

the second s	
ADDITIONAL QUESTION: SELF-ASSESSMENT	
Do you feel you are ready to graduate from the Pantawid Program? (Y/N- tick the box below) <i>Please Explain</i> .	
Yes	
No	
Remarks:	
D. Role Performance, Item 3 (Type of PO, if any)	
Signature over Printed Name of the Respondent	
Accomplished by:	
Signature over Printed Name of the Interviewer	
Designation:	

Family Member	Pop'n. group (Code: 0- Aged less than 18 yrs. old not in	Note: Salaries	basic compensation alth, housing and corm of goods such and wages of fam	n receiv clothing as rice, illy mer luded i	, corn, rental value mbers less than in the computatio Wages.	commissions, t s in kind, e.g., of housing, if	ips, bonuses, cash allow- compensations received in
	school, 1-In school, 2- Senior citizen, 3-PWDs, 4- Others)	Basic Compensation (in cash)	Cash Commission, Tips, Bonus	(food	sh Allowance I, health, hous- g & clothing)	Basic Compensat (in kind)	
(1)	(2)	(3)	(4)		(5)	(6)	(7)
1.							
2.					- 1		
3.						4	
k							
б.							
3.							
3.							
).							
0.							A
Sub-Total							1 million and the
Activity (e.g. net income from crop far ng, fishing including backyard produce is consumed by t (8)	planting where	Type (Code: 1 - Entrepreneurial, 2 - Sustenance) (9)	Gross Value/Sa (Php) (10)		Deduction (e.g. cost of ser pesticides, irrig cost of ca	ed, fertilizer, ation, labor, apital)	Net Income (Php)
(8)		(9)	(10)		(1)		(12)
2							
l.							
l.							
Sub-Total							
C3. Transfers (in the pas	st six months)						
					Amoun	the second s	
Sources	of Income		In Cas	h		Kind	Sub-Total
			(13)			(14)	(15)
<ol> <li>Receipts, gifts, support, relie abroad including those from</li> </ol>		ns of assistance					-
2. Receipts ,gifts, support and		other families/					
entities in the country 3. Support received from the P	bilippine govern	ment including		_			
support from the Pantawid F					×		
Sub-Total							
C4. Other Sources (in the	e past six mor	nths)					
	-1-1-				Amoun	t (Php)	
	of Income		In Cas	h	In	Kind	Sub-Total
Sources							
			(16)		(	17)	(18)
I. Pensions			(16)		(	17)	(18)
l. Pensions 2. Dividends			(16)		(	17)	(18)
I. Pensions 2. Dividends 3. Interests 4. Imputed Rental of owner-oo	ccupied dwelling	) unit	(16)		(	17)	(18)
I. Pensions 2. Dividends 3. Interests	ccupied dwelling	) unit	(16)			17)	(18)

	Sub-lotal of Inc	come (Php) from	n	Total In
C1 (Col. 7)	C2 (Col. 12)	C3 (Col. 15)	C4 (Col. 18)	(Col. 19 + (Col. 1
(19)	(20)	(21)	(22)	

# ----

alue/Sales Php)	Deduction (Php) (e.g. cost of seed, fertilizer, pesticides, irrigation, labor, cost of capital)	Net Income (Php)
	(11)	(12)
	l	

Amount (Php)					
In Cash	In Kind	Sub-Total			
(13)	(14)	(15)			
		-			

Amount (Php)		
In Cash	In Kind	Sub-Total
(16)	(17)	(18)

Income (Php)	Family Size	Per Capita Income (Php)	Monthly Per Capita Income (Php)	
19) + (Col. 20) . 21) + (Col.22)		(Col. 23) / (Col. 24)	(Col. 25/6)	
(23)	(24)	(25)	(26)	