



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. : DSWD7-2025-0731
Date : May 26, 2025

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

Sir/Madam:

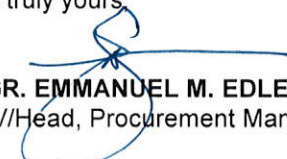
Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. Failure to indicate information could be the basis for non-compliance. Also, kindly furnish us with descriptive brochures, catalogues, literatures 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 supplier/s are required to submit true copies of their **valid Mayor's Permit and 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) 887-9720; 233-0261; 231-2172 local 17140 or 17110 or e-mail to bac.fo7@dswd.gov.ph on or before **May 30, 2025 at 5:00PM**.

Very truly yours,


ENGR. EMMANUEL M. EDLES
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 delivered **within 30 calander days from receipt and conformity of Purchase Order.**
- Place of Delivery: **Regional Haven for Women, AVRCC Compound, Camomot Franza Road, Brgy. Labangon, Cebu City**
- Terms of Payment: **within 30 days from the receipt of billing statement.**
- 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: _____


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)



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Field Office VII, Cebu City


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Company Address _____
Contact Person _____
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Tin Number: _____

RFQ No.: **DSWD7-2025-0731**
Date: **May 26, 2025**

Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	50	set	Supply and Delivery of Emergency Go Bag Bag: Bag, Large (10L capacity) Clothing & Protection: * 2 Sets of Clothing * 2 Sets of Underwear * 1 Pair of Coated Hand Gloves * 1 Emergency Blanket * 1 Bath Towel, lightweight & portable * 1 Elastic Bandage, 6"x5 yd * 1 Pair of Slippers, size: 7 Hygiene Kit: * 1 Toothbrush, medium * 1 Toothpaste (20g) * 1 Bath Soap (60g) * 2 Sachets of Shampoo (15ml each) * 1 Pack of Cotton Balls, 50's Basic Medical Supplies: * 10 Pcs Povidone Prep Pads (Antiseptic) * 10 Pcs Alcohol Pads * 3 Pairs of Surgical Gloves * 1 Pack of Adhesive Bandages, 12 strip * 5 Pcs Surgical Masks Emergency Tools: * 1 Flashlight with Extra Batteries or Case * 1 Set of SOS Kit (whistle, mini compass, multi-tool, etc.) Water & Food: * 2 Bottles of Water (500ml each) * High-energy bars or biscuits, 120g Additions by Category: Adult Female (15 piece) o 1 pack Sanitary Pads, 8's Mother with Dependent (0-4 years old) (15 piece) o 1 pack Diapers, medium, 4's o 1 Baby Wipe Pack (small) o 1 Small toy o 2 Feeding bottle, 100ml o 1 pack Formula Milk, 340g o 1 sachet Infant Cereal, 120g Mother with Teenager Dependent (15 piece) o 1 Sanitary napkin (pack/8pieces) o 1 Extra Toothbrush/Toothpaste Set o 1 Extra Set of Clothing (for teen)				

Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
			Male Children (5-8 years old) (5 piece) o Clothing, towel, and hygiene items (kids size) o 1 Small Toy or Coloring Book with Crayons o 1 Child-appropriate Face Mask o 2 brief Color Code for Emergency Go-Bags: 1. Adult Female -Blue 2. Mother with Dependent (0-4 years old) - Khaki 3. Mother with Teenage Dependent - Red 4. Male Children (5-8 years old) - Black Note: Must have printed label "Emergency Go Bag" per bag				
Total							
Approved Budget for the Contract: Php 250,000.00				Note: "Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable.			
End User: Regional Haven for Women							
PURPOSE : To provide essential emergency go-bag kits for the residents in the center.							

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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