

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. :	DSWD7-2022-1768 4
	Date :	November 3, 2022
Company Name:		1
Company Address:		
Contact Person:		
Contact No.:		
PhilGEPS Registration No.:		
Sir/Madam:		
Please quote your government price/s including delivery charges, VAT expenses for the goods listed in Annex A. Failure to indicate information kindly furnish us with descriptive brochures, catalogues, literatures and	on could be th	e basis for non-compliance. Also,
If you are the exclusive manufacturer, distributor or agent in the Philip attach in your quotation a duly notarized certification to this effect.	ppines for the	goods listed in Annex A, please
Interested service providers are required to submit true copies of their Registration Number upon submission of quotation. An Omnibus S raward		
Please accomplish and submit this form together with Annex A ar DSWD Field Office VII, Cebu City or send it through facsimile numb 17126 or kc.af7.procurement@gmail.com on or before November 8	ers (032) 233	3-8785; 233-0261; 231-2172 local
	aly yours, ACO	NG ment Management Section
Terms and Conditions: 1. Award shall be made on per: item basis v total quoted		ot basis
Quotation validity shall be not less than <u>60 calendar days.</u>	p.100	01 200
3. Good/s or Services shall be done on the specific dates in Annex	Α.	
4. Place of Delivery: Ayungon, Negros Oriental		
5. Terms of Payment: within 30 calendar days from the completio Statement / Sales Invoice.	n of services	and receipt of Billing
6. Liquidated Damages/Penalty: One-tenth of one percent for ever	eryday of dela	av shall be imposed.
7. In case of discrepancy between total price per item and unit price for by the quantity of that item, the latter shall prevail.		
8. Warranty Period, if applicable:		1 2
I am interested to quote and agree to the terms and conditions.	HENR	Y CLINT D. RICABORDA Canyasser
(Signature over Printed Name of Supplier / Authorized Representative)		

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

Company Name:	_ RFQ DSWD7-2022-1768
Company Address:	Date: November 3, 2022
Contact Person:	_ 1
Contact No.:	

Item	Qty	Unit	Articles / Descriptions	Statement of Compliance (State "Comply"	Bidder's Specifications	Unit Cost	Total Cost
No.				or "Not Comply")			
			Provision of Catering Services (1 Meal and 2 Snacks)				
			Title of Activity : Barangay Health and Emergency Response Team Training for Group 3 Phase 2				
	115	pax	Date: November 17, 2022				
	1		Title of Activity : Municipal Accountability Reporting for Group 3 Phase 1				
	65	pax	Date: November 23, 2022				
			Title of Activity : 1st Municipal Disaster Risk Reduction and Management Council (MDRRMC) Meeting for Group 3 Phase 2				
	65	pax	Day 2: November 29, 2022				
			Title of Activity : Project Development Workshop for Group 3 Phase 2				
	74	pax	Day 1: December 06, 2022 \				
	74	pax	Day 2: December 07, 2022				
	,		Venue: Ayungon, Negros Oriental				
			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)				
			No serving of CREAMDORY fish				
			No serving of BAM-E, PANSIT or BIHON (as viand)				
			Strictly NO SOFTDRINKS & FLAVORED BOTTLED DRINKS/POWDERED JUICES				
			* Please specify name of dishes				

No.	Qty	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
			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 or 240ml Canned Juice or 330ml Bottled Natural Juice 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: Php157,200.00		Note: "Bidder's Specifications" column may be filled to					
End	End User: KC-NCDDP-AF		with supplier's offer (brand, model, origin) or may co "Articles/Description" stated if applicable.				
urp	ose :	Provisi	on of food for the participants of the activity.				

HENRY CLINYD. RICABORDA

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

Signature of supplier/Authorized Representative over printed name

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