

## 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.	:	DSWD7-2024-0464
				Date	:	April 15, 2024
Company Name						
Company Address	:			_		
Contact Person				-		
Contact No.	: 111			_		
PhilGEPS Registration	n No.:			-		
Sir/Madam:						
incidental expenses	or the goo	as iisted in Anne	x A. Failure to in	ndicate informa	tion	applicable taxes, and other could be the basis for non-nd/or samples, if applicable.
If you are the exclusive attach in your quotation	e manufac on a duly no	turer, distributor o tarized certificatio	r agent in the Ph n to this effect.	ilippines for the	god	ods listed in <b>Annex A</b> , please
Interested supplier/ registration number	s are requ upon subi	uired to submit mission of quota	true copies o tion/s.	f their valid I	May	or's Permit and Philgeps
Please accomplish ar DSWD Field Office VI 140 or 148 or e-mail to	i, Cebu Cit	y or send it throu	ah facsimile num	bers (032) 233-	878	tion to the BAC Secretariat, 35; 232-0261; 231-2172 local
				Very truly yours	3,	
				ENGR. EMMAI	NUE	EL M. EDLES
						ement Management Section
Terms and Condition	s:			*		
<ol> <li>Award shall be mad</li> <li>Quotation validity sh</li> </ol>		item basis	✓ total quote	ed price	lot k	pasis
3. Good/s or Services				Annex A		
<ol><li>Place of Delivery:</li></ol>	DSWD - A	VRC II, Labango	n, Cebu City	/		
5. Terms of Payment:	within 30	days from the re	ceipt of billing s	tatement/Sales	s In	voice
6. Liquidated Damages	/Penalty:	One-tenth of or	ne percent for ev	veryday of dela	y s	hall be imposed.
<ol><li>In case of discrepan multiplied by the qua</li></ol>	intity of that	titem, the latter sl	m and unit price i nall prevail	for the Item as e	exte	nded or
8. Warranty period, if a			ian provan.			
				REINAFLOR C. Canvass		STO
I am interested to quote	and agree	to the terms and	conditions.			



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	Department of Social Westers and Development		
Company Name:			
Company Address:		RFQ	DSWD7-2024-0464
Contact Person:		Date	April 15, 2024
Contact No.:			
PhilGEPS Registration No.:			
TIN:			

Item No.	Qty.	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost	
			PROVISION OF CATERING SERVICES					
			1. Conflict Management					
1	50	pax	May 10, 2024 Meals: Lunch (Packed) Snacks: AM (Packed)					
	50	pax	November 8, 2024 Meals: Lunch (Packed) Snacks: AM (Packed)					
			2. World Mental Health Week					
2	45	pax	October 8, 2024					
	45	pax	October 10, 2024					
			Snacks: AM and PM (Packed) Catering Services: Lunch/Dinner: Rice, Soup, 2 Dishes: (Choices of: Beef/Pork/Chicken or Fish), 1 Dish: Vegetables Dessert (Choices of: Fruits or Cakes or Salads) Drinks: (Choices of: at least 500ml Bottled Water or 330ml Bottled Natural Juice or 240ml Canned Juice) No serving of CREAMDORY fish No serving of BAM-E, PANCIT or BIHON (as viand) Strictly NO SOFTDRINKS & FLAVORED BOTTLED DRINKS & POWDER JUICES AM/PM Snacks: Choices of: Pasta, Noodles, Sandwiches, Pastries, Burgers or Native Kakanin Drinks: (Choices of at least 330ml Bottled Natural Juice or 240ml Canned Juice or Hot Chocolate) Strictly NO SOFTDRINKS & FLAVORED BOTTLED DRINKS & POWDER JUICES					
			Other Specifications: 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 tract 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.					
prove			e Contract: Php 85,000.00 /	"Bidder's Specificati	ons" column may	/ be filled up w	vith service	
d User:	A	rea Voca	ational Rehabilitation Center II	"Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable.				

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

Signature of Supplier/Service Provider/Authorized Representative over Printed Name REINAFLOR C. VISTO Canvasser