



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. : DSWD7-2024-0793 ✓
 Date : May 30, 2024

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

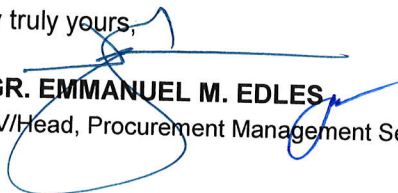
Sir/Madam:

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.

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; 232-0261; 231-2172 local 140 or 148 or e-mail to bac.fo7@dswd.gov.ph on or before **June 4, 2024 at 5:00PM.**

Very truly yours,

ENGR. EMMANUEL M. EDLES
 AO V/Head, Procurement Management Section

Terms and Conditions:

1. Award shall be made on per: item basis total quoted price lot basis
2. Quotation validity shall be not less than **60 calendar days.**
3. Good/s or Services shall be delivered **on the specified dates in Annex A**
4. Place of Delivery: Regional HAVEN Conference Room, Labangon, Cebu City
5. Terms of Payment: within 30 days from the receipt of billing statement/Sales Invoice
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: _____


REINAFLOR C. VISTO
 Carvasser

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

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



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


RFQ DSWD7-2024-0793 ✓
 Date May 30, 2024

| 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 (Lunch and Dinner & AM and PM Snacks (packed)) ✓ | | | | |
| | | | Year End PREW for residents and Staff ✓ | | | | |
| 1 | 50 ✓ | pax | December 6, 2024 ✓ | | | | |
| | | | Meals Lunch and Dinner & AM and PM Snacks (packed) | | | | |
| | | | Venue : Regional HAVEN Conference Room, Labangon, Cebu City ✓ | | | | |
| | | | Lunch/Dinner Menu: (Php 1,100.00 meal) ✓ | | | | |
| | | | > Rice , | | | | |
| | | | > 2 Main 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 240ml Canned Juice or 330ml Bottled Fresh Natural Juices i.e. Lemon Calamansi/Buko/, Cucumber etc.) | | | | |
| | | | No serving of CREAMDORY fish | | | | |
| | | | No serving of BAM-E, PANSIT or BIHON (as viand) | | | | |
| | | | Strictly NO SOFTDRINKS & FLAVORED BOTTLED DRINKS & POWDER JUICES | | | | |
| | | | 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 Bottle water, 240ml Canned Juice 330ml Bottled Fresh Natural Juices i.e. Lemon / Calamansi / Buko / Cucumber etc. or coffee / Hot Choco) | | | | |
| | | | Strictly NO SOFTDRINKS & FLAVORED BOTTLED DRINKS & POWDER 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 10:30 AM to 11:00 AM and Lunch while Dinner around 3:00 PM | | | | |
| | | | > Service provider must bring the Delivery Receipt, Sales Invoice or Billing Statement and Menu upon delivery to fast track the processing of payments. | | | | |

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|---|------|------|--|---|-------------------------|-----------|------------|
| | | | > 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 the activity. | | | | |
| Approved Budget for the Contract: Php 55,000.00 ✓ | | | | "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 : For provision of food for the participants of the activity | | | | | | | |

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

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


 REINAFLO R. C. VISTO
 Canvasser