

**REQUEST FOR QUOTATION  
NP-SMALL VALUE PROCUREMENT**RFQ No. : DSWD7-2025-0860 ,0867 / ,0866 ,0864. 0862  
Date : June 4, 2025Company 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 11, 2025 at 4:00PM.**

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 **on the specified dates in Annex A**
- Place of Delivery: **Cebu City, Cebu**
- Terms of Payment: **within 30 days from the receipt of billing statement/Sales Invoice**
- 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: \_\_\_\_\_

  
**REINAFLO R. C. VISTO**  
Canvasser

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: \_\_\_\_\_

DSWD7-2025-0860 ,0867  
 RFC ,0866 ,0864. 0862  
 Date June 4, 2025

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 for the following activities					
1			Meals : Lunch (Packed) ✓					
			Snacks: AM (Packed) ✓					
			<i>Title of Activity :</i>	National Disability Rights Week Celebration ✓				
	100	pax	<i>Date :</i>	July 18, 2025 ✓				
2			Meals : Lunch (Packed) ✓					
			Snacks: AM & PM (Packed) ✓					
			<i>Title of Activity :</i>	Disability-Sensitivity Learning Session to DSWD7 Staff ✓				
	30	pax	<i>Date :</i>	July 22, 2025 ✓				
3			Meals : Lunch (Packed) ✓					
			Snacks: AM & PM (Packed) ✓					
			<i>Title of Activity :</i>	Women with Disability Day: Entrepreneurial Training ✓				
	25	pax	<i>Date :</i>	July 29, 2025 ✓				
4			Meals : Lunch (Packed) ✓					
			Snacks: AM & PM (Packed) ✓					
			<i>Title of Activity :</i>	Capacity Building for Regional Federation of Persons with Disability Officers ✓				
	25	pax	<i>Date :</i>	October 9, 2025 ✓				



Item No.	Qty.	Unit	Articles / Descriptions		Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
5			<b>Meals : Lunch (Packed)</b>					
			<b>Title of Activity :</b>	<b>Regional Federation of Persons With Disability Meeting</b>				
	25	pax	<b>Date :</b>	October 10, 2025				
			<b>Venue : Cebu City, Cebu</b>					
			<b><u>Lunch Meal</u></b>					
			> <b>Soup</b> (should be stock or cream - based, with pieces of meat chunks, may be thick / thin / smooth textured)					
			> <b>Rice</b>					
			> <b>3 Main Dishes:</b> Choices of Beef, Pork, Chicken, and Fish					
			> <b>1 Vegetable Dish</b>					
			> <b>Dessert:</b> Choice of Fresh Tropical Fruits or Pastries or Salads					
			> <b>Drinks:</b> (Choices of: at least 500 ml Bottled Water or 330ml Bottled Natural Juice / Fresh or 240ml Canned Juice)					
			<b><u>Snacks (AM and PM)</u></b>					
			> <b>Choice of <i>any</i> of the following:</b> (a) Sandwiches with sides (Clubhouse or similar with in size) (b) Burgers with sides (c) Pasta with toasted bread / bun (Pasta should be 1 cup) (d) Noodle Dish (e.g. Pancit/Bihon) (e) Breads / Pastries - should provide appropriate portion size per serving (f) Native Kakanin - should provide atleast 3 variety per serving					
			> <b>Drinks:</b> (Choices of: at least 500 ml Bottled Water or 330ml Bottled Natural / Fresh Juice or 240ml Canned Juice); for native kakanin, may be paired with either hot chocolate or coffee					



**PURPOSE :** Provision of food for the participants of Meeting

Signature of Supplier/Service  
Provider/Authorized  
Representative over Printed

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