

## 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.	: DSWD7-2024-1231
	Date	: September 19, 2024
Company Name:		
Company Address:		*
Contact Person:		
Contact No.:		
PhilGEPS Registration No.:		
Sir/Madam:		
Please quote your government price/s including delivery charges, VA expenses for the goods listed in Annex A. Failure to indicate inform Also, kindly furnish us with descriptive brochures, catalogues, literature	nation could	be the basis for non-compliance.
If you are the exclusive manufacturer, distributor or agent in the Phili attach in your quotation a duly notarized certification to this effect.	ippines for the	e goods listed in <b>Annex A</b> , please
Interested service providers are required to submit true copies of Philgeps Registration Number upon submission of quotation. At required prior to award.		2000 100 대통기 : 120 N - 120 (1900 N C) 이 100 N N N N N N N N N N N N N N N N N N
Please accomplish and submit this <b>form</b> together with <b>Annex A</b> ard DSWD Field Office VII, Cebu City or send it through facsimile numb 17126 or <b>kalahiaf7.procurement23@gmail.com</b> on or before <b>Septe</b>	ers (032) 23	3-8785; 233-0261; 231-2172 local
Very to	ruly yours.	
ENGR	EMMANILE	S. M. EDLES
		rement Management Section
Terms and Conditions:		Julian Managamana assum
1. Award shall be made on per: item basis v total quoted	d price	lot basis
2. Quotation validity shall be not less than 60 calendar days.		
3. Good/s or Services shall be delivered on the scheduled date of the	ne activity.	
4. Place of Delivery: DSWD Field Office VII, Cebu City		
5. Terms of Payment: within 30 calendar days from the completion Statement / Sales Invoice.	on of services	s and receipt of Billing
6. Liquidated Damages/Penalty: One-tenth of one percent for every	eryday of de	lay shall be imposed.
7. In case of discrepancy between total price per item and unit price for	or the item as	extended or multiplied
by the quantity of that item, the latter shall prevail.		1
8. Warranty Period, if applicable:		$\mathcal{G}$
	E	DLYN S. CANGQUE
		Canvasser
I am interested to quote and agree to the terms and conditions.		V
(Signature over Printed Name of Supplier /		

Procurement Form No. 04-A (Annex A)

**DSWD** 

To be used for the closing documents of Kalahi ACTs.

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

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

Annex A

Cong	dany ivani	e		<del> </del>		Q No.: DSWD7	
Comp	oany Addr	ess:			Da	te: Septem	ber 19, 2024
Conta	act Person	r					
Conta	act No.:	<del></del>					
PhilG	EPS Regi	stration N	o.:				
Item No.	Qty	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	1,500	piece	CORRUGATED CARTON BOX, 15.5 x 12 x 10.5 inches, 6mm thickness				-
			Total:				
Approved Budget for the Contract: Php97,500.00		Note: "Bidder's Specifications" column may be filled up with supplier's offer (brand, model, origin) or may copy "Articles/Description" stated if applicable.					

Signature of supplier/Authorized Representative over printed name

Purpose:

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