

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office VII

Department of Social Welfare and Development Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

REQUEST FOR QUOTATION NP-SMALL VALUE PROCUREMENT

	RFQ No. : DSWD7-2024-1262 \
	Date : September 25, 2024
Company Name:	_
Company Address:	_
Contact Person:	_
Contact No.:	_
PhilGEPS Registration No.:	_
Sir/Madam:	
Please quote your government price/s including delivery charge expenses for the goods listed in Annex A. Failure to indicate info kindly furnish us with descriptive brochures, catalogues, literature	ormation could be the basis for non-compliance. Also,
If you are the exclusive manufacturer, distributor or agent in the attach in your quotation a duly notarized certification to this effect	
Interested service providers are required to submit true copies Philgeps Registration Number upon submission of quotation required prior to award.	ies of their valid Mayor's/Business Permit and on. An Omnibus Sworn Statement shall be
Please accomplish and submit this form together with Annex DSWD Field Office VII, Cebu City or send it through facsimile 17126 or kalahiaf7.procurement23@gmail.com on or before S	numbers (032) 233-8785; 233-0261; 231-2172 local
in the state of t	ery truly yours. NGR. EMMANUEL M. EDLES O V/Head, Procurement Management Section
1. Award shall be made on per: item basis v total of	juoted price lot basis
2. Quotation validity shall be not less than <u>60 calendar days</u> .	duoted price lot basis
3. Good/s or Services shall be delivered on or before the sched	luled date of the activity
4. Place of Delivery: within Metro Cebu	rated date of the activity.
	pletion of services and receipt of Billing Statement
6. Liquidated Damages/Penalty: One-tenth of one percent for 7. In case of discrepancy between total price per item and unit proby the quantity of that item, the latter shall prevail.	or everyday of delay shall be imposed. ice for the item as extended or multiplied
8. Warranty Period, if applicable: I am interested to quote and agree to the terms and conditions.	EDLYN S. CANGQUE Canyasser
and conditions.	

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

Comp	any Na	me:		<u> </u>	RFQ No.: DSWD7-2024-1262		
Comp	any Ad	dress:		_	Dat	te: Septembe	er 25, 2024
Conta	ct Pers	on:					
Conta	ict No.:						
PhilG	EPS Re	gistration	No.:				
Item No.	Qty	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	40	piece	Name of Activity: Regional Fiduciary Review and Closing Requirements Workshop Date: October 9-11, 2024 Venue: within Metro Cebu Customized Plaques Specifications Use of acrylic materials Printed words in sticker with full color as per design Height: 10 inches including base Base and body width: 8 inches Thickness: 5mm Base: 5mm clear / 3mm black Please see attached customized design Note: *Must be delivered 2 days before the activity *Supplier must submit sample finish product within 3 days upon receipt of approved PO before mass production.	"Not Comply")			
			Charge to: Kalahi-CIDSS KKB Funds				
	ŀ	enance of engage				Total:	
Appr	oved	Budget	for the Contract: Php60,000.00	supplie	r's Specificatio r's offer (brand, ticles/Description	model, origin)	y be filled up with or may copy plicable.
Purp	ose:	To be u	sed during the conduct of Regional Fiduciary Review and	d Closing Re	quirements \	Workshop) NA
Note: F			dure in accordance with DSWD-Memorandum Circular No. 2, Series of 2007.				

Signature of supplier/Authorized Representative over printed name

EDLYN S. CANGQUE Canvasser







KALAHI CIDSS NCDDP

Shalaine Marie S. Lucero, CESO III
Regional Director

Customized Plaques

Specifications:

- ☐ Use of acrylic materials
- ☐ Printed words in sticker with full color as per design
- ☐ Height: 10 inches including base
- ☐ Base and body width: 8 inches ☐ Thickness: 5mm
- ☐ Base: 5mm clear / 3mm black

or /