

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office VII

and Development Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

REQUEST FOR QUOTATION NP- SMALL VALUE PROCUREMENT

	RFQ No. : DSWD7-2021- 0199	
	Date : <u>February 17, 2021</u>	
Company Name :		
Company Address :		
Contact Person :		
Contact No. :		
PhilGEPS Registration No.:		
Sir/Madam:		
Please quote your government price/s including delivery of incidental expenses for the goods listed in Annex A. Failure compliance. Also, kindly furnish us with descriptive brod applicable.	e to indicate information could be the basis for n	on-
If you are the exclusive manufacturer, distributor or agent please attach in your quotation a duly notarized certification to		Α,
Interested supplier/s are required to submit true copies of the Number , Omnibus Sworn Statement for ABC above Php50 above Php500,000.00 upon submission of quotation/s.		
Please accomplish and submit this form together with Anne DSWD Field Office VII, Cebu City or send it through facsil local 140 or 148 or e-mail to bac.fo7@dswd.gov.ph on or before the complex of th	mile numbers (032) 233-8785; 232-0261; 231-2	
	Very truly yours, ROSARIO P. BACONG AO V/Head, Procurement Management Section	1
Terms and Conditions:		
 Award shall be made on per: item basis ✓ total Quotation validity shall be not less than 60 calendar days. 	al quoted price lot basis	
Good/s or Services shall be delivered within 15 days after 4. Place of Delivery: DSWD FO VII, Cebu City		
5. Terms of Payment: within 30 calendar days from the re	eceipt of Billing Statement / Sales Invoice.	
6. Liquidated Damages/Penalty: One-tenth of one percent		
7. In case of discrepancy between total price per item and un by the quantity of that item, the latter shall prevail.	it price for the item as extended or multiplied	
8. Warranty Period, if applicable:		
	JOSELITO TABILON	
I am interested to quote and agree to the terms and condition	ns. Canvasser	
(Signature over Printed Name of Supplier / Authorized Representative)		

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Company Name

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

Company Address	SS		Date	rebruary 17, 2021	2021
Contact No.					
PhilGEPS Registration No.:	tration N	Vo.:			
Item No. City.	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Unit Cost	Total Cost
		Printing of Brochure including lay-out, drawing and design			
1 900	p _C	1. Adoption			
2 900	рс	2. Foster Care			
3 500	рс	3. ICAB			
4 450	pc	4. RA 11222			
		Specification:			
		* A4 size glossy paper, i.e. C2S80			
		*Single-Sheet,3 fold Lay-out, back to back full color printing			
		Note : The Service Provider must submit sample for approval before final reproduction of the brochures.			
		 Within 10 days upon receipt of PO, the service provider must submit sample for approval 			
		Within 15 days, the service provider must deliver all brochures once approved.			
		Total:			
Approved Budge	t for the	Approved Budget for the Contract: Php 55,000.00	Note: "Bidder's Specifications" column may be filled up with suppliers offer /brand, model, origin) or may copy "Articles/Description" stated if	rticles/Description	n suppliers
End User: ARRS	ŝ		applicable.		
Purpose :	Advo	Advocacy Materials for Alternative parental care Program			

Signature of Supplier / Authorized Representative Over Printed Name

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

JOSELITO TABILON Canyasser

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