



REQUEST FOR QUOTATION
NP- SMALL VALUE PROCUREMENT

RFQ No. : DSWD7-2020-0991
 Date : September 17, 2020

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, Philgeps Registration Number, Omnibus Sworn Statement** for ABC above Php50,000.00, Income Tax Return for ABC above Php500,000.00 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 **September 22, 2020 at 5:00 pm.**

Very truly yours,

ROSARIO P. BACONG
 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 within 30 **calendar days** upon receipt of approved Purchase Order.
4. Place of Delivery: **DSWD FO VII, Cebu City**
5. Terms of Payment: **within 30 calendar 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: _____

LEIF WAYNE YOUNG
 Canvasser

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

 (Signature over Printed Name of Supplier /
 Authorized Representative)



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

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Item No.	Qty.	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	210	pc	2021 PANTAWID ADVOCACY PLANNER Specifications: <ul style="list-style-type: none"> Finished Size: 5.5" W x 8.1" H (planner) Finished Size: 5.8" W 8.54 H (box) C2S # 140lbs (cover) C2S 220lbs (box) Bookbinding board 30gsm (board) Bookpaper # 70gsm (inside & flyleaf) Bookpaper # 70gsm (divider) Full Color <ul style="list-style-type: none"> No. of pages: 170 including front and back cover including the 12 pages perforation and 1 page - sticker Some pages will be dedicated to promotion on Pantawid like photos and infographics Matte Lamination (one side-cover), Perfect Binding Offset Printer with layouting Note: > Supplier should submit the final layout prior to mass printing				
Approved Budget for the Contract: Php 163,380.00 Charge to: Pantawid End User: Social Marketing Unit (SMU)				Note: "Bidder's Specifications" column may be filled up with supplier's offer (brand, model, origin) or may copy "Articles/Description" stated if applicable.			
Purpose : For the promotion of Pantawid Pamilyang Pilipino Program.							

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

Signature of Supplier / Authorized Representative _____
 Over Printed Name

LEIF WAYNE YOUNG
 Canvasser