

DSWD 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.	: DSWD7-2024-0760 /
		Date	: May 30, 2024
Company Name:			
Company Address:		No. of the last of	
Contact Person:	Mark and and a second s		
Contact No.:			
PhilGEPS Registration N	lo.:		
Sir/Madam:			
expenses for the goods	rnment price/s including delivery ch listed in Annex A. Failure to indicat criptive brochures, catalogues, liter	te information could be the	ne basis for non-compliance. Also
If you are the exclusive attach in your quotation a	manufacturer, distributor or agent a duly notarized certification to this e	in the Philippines for the effect.	goods listed in Annex A, please
Interested service prov Philgeps Registration N prior to award.	iders are required to submit true Number upon submission of quo	copies of their valid Ma station. An omnibus Swe	ayor's/Business Permit and orn Statement shall be required
Field Office VII, Cebu Ci	submit this form together with Anne ity or send it through facsimile num 23@gmail.com on or before June	nbers (032) 233-8785; 23	on to the BAC Secretariat, DSWD 33-0261; 231-2172 local 17126 or
		Very truly yours,	
		ENGR. EMMANUEL	
Terms and Conditions:		AO V/Head, Procure	ment Management Section
Award shall be made of		otal quoted price	ot basis
	be not less than <u>60 calendar days</u>		DL Dasis
	all be delivered on the scheduled (
	SWD FO VII, Cebu City	and of the dollarity.	
5. Terms of Payment: 7	vithin 30 calendar days from the o	completion of services	and receipt of Billing Statement
The state of the s		45 1 511	
7 In case of discrepancy	Penalty: One-tenth of one perce between total price per item and un	ent for everyday of delay	y shall be imposed.
by the quantity of that i	tem, the latter shall prevail.	nii price for the item as ex	dended or multiplied
	olicable:		Λ
		enting to the second of the se	Ge
		EC	PLYN S. CANGQUE
I am interested to quote a	and agree to the terms and condition		Canvasser
ram interested to quote a	and agree to the terms and condition	115.	
Harris William Company Company	3		
	Printed Name of Supplier /		
Authoriz	red Representative) Page 1 o	of 2	



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

Com	oany Na	ame:					7-2024-0760
Com	oany Ad	ldress:				Pate: May 30	, 2024
Conta	act Pers	on:					
Conta	act No.:						
PhilG	EPS Re	egistration	No.:				
Item No.	Qty	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
			Provision of Customized Plaques				
1	100	piece	Name of Activity: Orientation / Training on KALAHI-CIDSS Program Implementation Process (Omnibus Guidelines) Under KKB CDD 2024 Budget Date: November 13-15, 2024 Venue: within Metro Cebu Details/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 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.				
			Charge to: Kalahi-CIDSS KKB				
				11		Total:	
Approved Budget for the Contract: Php150,000.00			Note: "Bidder's Specifications" column may be filled up with supplier's offer (brand, model, origin) or may copy "Articles/Description" stated if applicable.				
Purpose: Provision of Customized Plaque							
Note: I	Procurer	ment proce	edure in accordance with DSWD-Memorandum Circular No. 2, Series of 200	07.	***************************************	e de la composition della comp	

Signature of supplier/Authorized Representative over printed name

EDLYN S. CANGQUE
Canvasser

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