

REQUEST FOR QUOTATION
SMALL VALUE PROCUREMENT

RFQ No. : DSWD7-2025-1219
Date : August 11, 2025

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** in accordance with Implementing Rules and Regulations of Republic Act 12009. Failure to indicate required information/s 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 or service provider/s is/are required to submit true copies of **valid Business/Mayor's Permit** and **Philgeps Registration Number** upon submission of the quotation/s. An **Omnibus Sworn Statement** is required prior to award.


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) 887-9720; 232-0261; 231-2172 local 17140 or 17110 or e-mail to bac.fo7@dswd.gov.ph on or before **August 15, 2025 at 5:00PM.**

Very truly yours,


ENGR. EMMANUEL M. EDLES
AO V/Head, Procurement Management Section

Terms and Conditions:

- Award shall be made on per: ☐ item basis ☒ total quoted price ☐ lot basis
- Quotation validity shall be not less than **60 calendar days.**
- Good/s or Services shall be delivered **within 30 calendar days after the receipt and conformity of Purchase Order.**
- Place of Delivery: **DSWD FO VII, Corner M.J. Cuenco Avenue and Gen. Maxilom Ext., Carreta, Cebu City**
- Terms of Payment: **within 30 days from the receipt of billing statement.**
- Liquidated Damages/Penalty: **One-tenth of one percent for everyday of delay**
- 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.
- Warranty period, if applicable: _____


CHARL ALBERT J. TORREFIEL
Canvasser

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

(Signature over Printed Name of Supplier / Service
Provider / Authorized Representative)



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

Company Name _____
Company Address _____
Contact Person _____
Contact No. _____
PhilGEPS Registration No.: _____
Tin Number: _____

RFQ No.: **DSWD7-2025-1219**
Date: **August 11, 2025**

Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
			Supply and Delivery of Advocacy Materials				
			Advocacy Materials for DSWD-7				
1	255	pieces	Advocacy Tote Bag Specifications *Material: Canvass *Body size: width- 12 inches, height 14 inches *Handle size: W 1.5 inches. H 10 inches *Bottom: 4 inches				
2	250	pieces	Wide Brim Hat Specifications *Brim width: 3.5in/8cm *Top width diameter: 6.3in/16cm *Hat height: 3.5in/8cm *Hat Circumference: 22.8in/58in *Color: Stone *Printed DSWD Logo				
3	150	pieces	Umbrella Specifications *Diameter: 40 inches *Height : 36 inches TRI-FOLD. FOLDABLE AUTOMATIC ANTI-UV SUNSCREEN UMBRELLA Fiber frame, with stainless steel material. *Color: Navy Blue Note: All design and/or layout will be provided by the Social Marketing Unit. Supplier must provide mock-up copy for approval prior to mass production. Must be delivered 30 days after approval of mock-up copy.				
Total:							
Approved Budget for the Contract: Php 243,800.00				"Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated or may state brand, model and country of origin of item offered, if applicable.			
End User: SMU							
PURPOSE : Information, Education and Communication (IEC) materials							

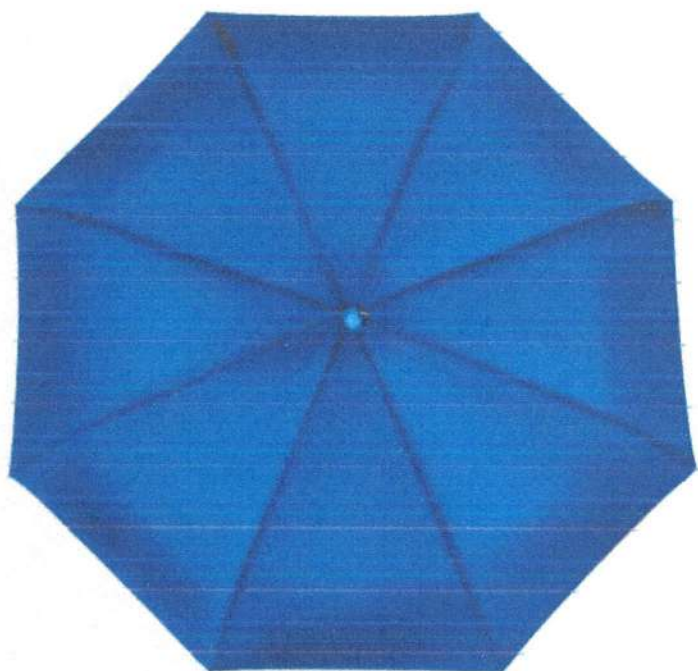
CHARL ALBERT J. TORREFIEL
Canvasser

Signature of Supplier / Authorized
Representative Over Printed Name

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Handwritten signature in blue ink.



on
SD



FRONT



BACK

Handwritten signature or initials in blue ink.