

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office MIMAROPA Region 1680 F.T. Benitez corner Malvar Sts., Malate, Manila

## REQUEST FOR QUOTATION

		RFQ No.	2021-09-0834 NP-SVP September 21, 2021
		Date.	September 21, 2021
Company Name	· ·		
Company Address			
Contact Person			
Contact No.	*		
Email Address			
Company TIN			
PhilGEPS Reg. No.	<del>}</del> _		
Sir/Madam:			
Please quote your go	overnment price/s including delivery charges, V	AT or other a	pplicable taxes, and other
	for the goods listed in Annex A. Failure to indi-		
	nish us with descriptive brochures, catalogues		
	nanufacturer, distributor, or agent in the Philipp uly notarized certification to this effect.	ines for goods	s listed in Annex A, please attach
A statistica editional escape	Haak assiss of usus Commonule Business Bo	mait Massarla	Parmit PhilGEDS Cortificate
	attach copies of your Company's Business Peness Tax Return and Omnibus Sworn Stater		
	submitted in lieu of the Mayor's /Business Peri		
membership maybe	submitted in fied of the Mayor's /Busiliess Pen	me and Frite	DEF 3 (Vegistration Number
Please accomplish a	nd submit this form together with Annex A to D	SWD - Procur	ement Unit at 2nd Floor 1680
	Malvar Sts., Malate, Manila or fax it through n		
	o@dswd.gov.ph not later than 5:00 PM on		
or cinan to: ignoor	ACCOMUNICATION INC. INC. INC.	OL: ILMOLI	
		Vand	ruly yours.
		Very	ruly yours.
		HARV	YB. CALABIO dollans
			strative Officer V 7 1/1/1/1
			rement Section
Terms and Condition	ons:		
1 Award shall be m	nade on per: litem basis X total qu	eted price	lot basis
Award shall be n     Price Validity shall	all be valid until: One Hundred Twenty (120) Cal		IOL Dasis
	e delivered or November 25, 2021	citual days	
Place of Delivery		ndoza St., Brgv.	Model, Puerto Princesa City, Palawan)
	nt: within 15-30 days upon final inspection a		
	LDDAP-ADA (List of Due and Demandable Acc		
Account Name:	[[[[[] [[] [[] [[] [[] [[] [[] [[] [[]		Number :
Bank Name:		Branch:	
**Note: Non Lar	nd Bank of the Philippines accounts shall be ch	arged a servic	e fee
6. Liquidated Dama			
the amount of t	he liquidated damages shall be at least equal to	one-tenth of	one percent (0.001) of the cost of
	d portion for every day of delay shall be impose		
	es ten percent (10%) of the amount of contract,		
	thout prejudice to other courses of action and r	emedies availa	able under the circumstances.
- Continue of the continue of	e indicate brand, model and country of origin.	1 (12) 50	
	pancy between unit cost and total cost, unit cost s	hall prevail.	
9. Please indicate			to the site Description of States
	pective supplier must be registered at the Philippine		
(PhilG	EPS). You may visit the PhilGEPS website at www.	pmigeps.gov.ph	to register
	3		
	<b>S</b> 2.1000		
The second secon	TÀ G. LICOP		
	ement Officer		
Telefax: 5336-81	06 to 07 loc. 24051-52		( Supplier)

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MIMAROPA Region

1680 F.T. Benitez corner Malvar Sts., Malate, Manila

Note: "Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PhilGEPS). You may vist the PhilGEPS website at www.philgeps.gov.ph to register"

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Date:	

NP-SVP MOP:

Company Name	:
Company Address	
Contact Person	:
Contact No.	
Email Address	
Company TIN	
DEHOTEDO DOS NO	

tem No.	Qty.	Unit	Purchaser's Spcification	Bidder's Specifications	Unit Cost	Total Cost
1	150	jar	ASCORBIC ACID with ZINC, 500mg/15mg, 10 Capsule/Pack			
2	50	pack	PARACETAMOL, 500mg, 20 tablets/pack			
3	50	bottle	ALCOHOL, ISOPROPHYL, 70% Ethyl Alcohol, 500ml			
4	50	dozen	SHAMPOO, 12 Sachet			
5	50	box	BATH SOAP, ANTI-BACTERIAL, 135 gms			
6	50	pack	COTTON BUDS, 100 tips/pack			
7	50	pack	BISCUIT, SOFT, 10pcs/pack			
8	50	pack	CEREAL DRINKS, 40 grams, VANILLA or CHOCOLATE Flavor, 12 pcs/pack			
9	50	pack	CHOCOLATE MALT DRINK, 24 grams, 12 pcs/pack			
10	50	piece	ECO BAG, RECYCLABLE, RED			
11	50	box	OOTHPASTE, Tube, 125ml			
12	50	piece	TOOTHBRUSH, Soft Bristle, Individual Piece/Pack	OOTHBRUSH, Soft Bristle, Individual Piece/Pack		
13	150	piece	INSTANT NOODLES, MAMI, 55gms-70gms			
14	50	box	FACE MASK, DISPOSABLE, Size: 17.5 x 9.5 cm, 3-Ply, Non-Woven + Filter Cotton, 50pcs/box			
15	100	can	SARDINES, IN TOMATO SAUCE, 155gms			
				Note: Please specify brand/ model/ origin Please fill up the space for Bidder's		
			APPROVED BUDGET FOR THE CONTRACT: PHP 50,000.00	"Failure to indicate information could be basis for non-compliance."		

PURPOSE:

PURCHASE OF WELFARE GOODS (HYGIENE KITS, VITAMINS AND GOODS) FOR PERSONS LIVING WITH HIV IN OBSERVANCE OF WORLS AIDS DAY

PR No.:

2021-09-0834

IMPORTANT: The winning bidder MUST SIGN the original copy of Purchase Order (P.O.) at DSWD FO MIMAROPA Region, Procurement Unit within three (3) days from the date advance copy was served thru fax. FAILURE to show up and sign the original P.O. means the bidder is not interested and will be ground for suspension or blacklisting in DSWD's future biddings. VAT

> LORETTA G. LICOP Procurement Officer
> Telefax: 5336-8196 to 07 loc. 24052

(Signature	over printed name)
	Supplier

Non-VAT