

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

## REQUEST FOR QUOTATION

		RFQ No. 2023-01-0060
		Date: January 5, 2023
Company Name		
Company Address	20	
Contact Person	<u> </u>	_
Contact No.	* ·	
Email Address	<u>t</u>	
The state of the s	<u> </u>	
Company TIN	6	
PhilGEPS Reg. No.	£	<u> </u>
Sir/Madam:		
expenses for the goo		arges, VAT or other applicable taxes, and other incidental tate information could be basis for non -compliance. Also, is and/or samples, if applicable.
	nanufacturer, distributor, or agent in the prized certification to this effect.	e Philippines for goods listed in Annex A, please attach in your
PhilGEPS Certificat in accordance with Omnibus Sworn Stat	e, latest Income/Business Tax Retu the attached format marked as Anr	ness Permit, Mayor's Permit, PCAB License (if applicable), rn and a notarized or unnotarized Omnibus Sworn Statement nex B. If awarded, please submit immediately the duly notarized carized). The Certificate of Platinum Membership maybe GEPS Registration Number.
1680 F.T. Benitez co 5:00 PM on Janaury	rner Malvar Sts., Malate, Manila <u>or em</u> 7 <u>9, 2023 (Monday).</u> Quotations subm aluation. Please indicate in the subject	ex A to DSWD MIMAROPA Region -BAC Secretariat at 2nd Floor nail to: procurement.fomimaropa@dswd.gov.ph not later than litted to the different email address(es) as stated above shall not of your email the title of the Project using this format: [RFQ]  Very truly yours,
Terms and Condition	ons:	Administrative Officer V Procurement Section Head
1. Award shall be	made on per:item basis	X total quoted price lot basis
	nall be valid until: One Hundred Twee	
Services shall to     Place of Delive		fter receipt of approved Purchase Order
5. Terms of Paym	ment: within 30 days upon final insp gh LDDAP-ADA (List of Due and De	pection and acceptance (send bill arrangement) mandable Accounts Payable- Advice to Debit Account) Account Number :
Bank Name:_	and Bank of the Philippines accour	Branch:
<ol><li>Liquidated Dan the amount of</li></ol>	nages/Penalty: In case of failure the liquidated damages shall be at	to make full delivery within the time specified above, least equal to one-tenth of one percent (0.001) of the cost of hall be imposed. Once the cumulative amount of liquidated
damages read the contract v	thes ten percent (10%) of the amou	nt of contract, the Procuring Entity may rescind or terminate f action and remedies available under the circumstances.
	repancy between unit cost and total co	st, unit cost shall prevail.
	spective supplier must be registere	d at the Philippine Government Electronic Procurement System website at www. philgeps.gov.ph to register "
	urement Officer	
Telefax: 5336-810	6 to 07 loc. 24052	Signature Over Printed Name



Company Name

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

( should be filled up by suppplie

Company Address Contact Person Contact No. **Email Address** Company TIN PhilGEPS Reg. No. Item Bidder's Specifications (Please fill out the specifications in the space provided)

NOTE: Supplier must state here either the statement of compliance either "COMPLY" or "NOT COMPLY". "Failure to indicate information could be basis Qty. Unit PARTICULARS Unit Cost Total Cost No. for non-compliance." 1 PCS 45 **CUSTOMIZED TOTE BAG** Material: Denim Color: Navy Blue Size: 16 inches height x 15 inched width with strap 1.5 inches worth with printed DSWD logo at the center of the bag Please see attached design \*\*\*Nothing Follows\*\*\* Delivery Date: 7 Calendar Days after receipt of approved PO Delivery Place: DSWD Regional Office, Malate, Manila APPROVED BUDGET FOR THE CONTRACT : Php 13,500.00 Thirteen Thousand Five Hundred Pesos Only Note: Please specify brand PAGE 1 OF 1

PURPOSE:	SUPPLIES FOR NATIONAL CONFERENCE ON RECONCILIATION OF FUNDS ON JANUARY 17-20, 2023	
PR No.:	2023-01-0060	
		VAT
		Non-VAT
	(Signature over Printed name) Supplier	

model/origin.

IMPORTANT: The winning bidder MUST SIGN the original copy of Purchase Order (P.O.) at DSWD FO MIMAROPA Region, Procurement Section within three (3) days from the date advance copy was served thru email. F AILURE 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.