

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

## REQUEST FOR QUOTATION

		Date: March 13, 2023
		Date.
Company Name	2	
Company Address	¥	
Contact Person	7	<del></del>
Contact No.		<del></del> -
Email Address	2	_
Company TIN	4	_
PhilGEPS Reg. No.	×	
Chapter Committee Co. 197	,	
Sir/Madam:		
expenses for the good		narges, VAT or other applicable taxes, and other incidental cate information could be basis for non -compliance. Also, as and/or samples, if applicable.
	nanufacturer, distributor, or agent in the strict of the certification to this effect.	ne Philippines for goods listed in Annex A, please attach in your
PhilGEPS Certificate Statement in accord duly notarized Omnib	e, latest Income/Business Tax Retu lance with the attached format mar us Sworn Statement (if previously sul	iness Permit, Mayor's Permit, PCAB License (if applicable), irrn and a notarized or unnotarized Omnibus Sworn ked as Annex B. If awarded, please submit immediately the bmitted is unnotarized. The Certificate of Platinum ness Permit and PHILGEPS Registration Number.
Floor 1680 F.T. Benit maediones@dswd.g address(es) as stated	ez comer Malvar Sts., Malate, Manila <u>ov.ph</u> not later than <u>5:00 PM on Ma</u>	ex A to DSWD MIMAROPA Region -BAC Secretariat at 2nd or email to: procurement.fomimaropa@dswd.gov.ph and orch 20, 2023 (Monday). Quotations submitted to different email valuation. Please indicate in the subject of your email the title of of Submission.  Very truly yours,
		HARVY BLEALABIO 3-/3-2023 Administrative Officer V Procurement Section Head
Terms and Conditio	ns:	_ '
<ol> <li>Award shall be</li> <li>Price Validity sh</li> </ol>	made on per:item basis nall be valid until: <u>One Hundred Twe</u>	X total quoted price lot basis onty (120) Calendar days
<ol><li>Services shall b</li></ol>	e delivered on: 7-15 CD after recei	pt of approved Purchase Order
Place of Deliver     Terms of Paym	pswb MIMAROPA (1680 F.T. within 30 days upon final inst	Benitez cor. Malvar St., Malate, Manila)
Payment through	h LDDAP-ADA (List of Due and De	mandable Accounts Payable- Advice to Debit Account)
Account Name Bank Name:	·	Account Number : Branch:
**Note: Non La	nd Bank of the Philippines accoun	ts shall be charged a service fee
<ol><li>Liquidated Dam the amount of</li></ol>		to make full delivery within the time specified above, least equal to one-tenth of one percent (0.001) of the cost of
the unperform	ed portion for every day of delay sl	nall be imposed. Once the cumulative amount of liquidated
		nt of contract, the Procuring Entity may rescind or terminate faction and remedies available under the circumstances.
7. For goods pleas	se indicate brand, model and country	of origin.
<ol><li>In case of discr</li><li>Please indicate</li></ol>	epancy between unit cost and total co	ost, unit cost shall prevail.
10. NOTE: "Pros	spective supplier must be registere	d at the Philippine Government Electronic Procurement Syste website at www. philgeps.gov.ph to register "
D	lithung.	, , , , , , , , , , , , , , , , , , , ,
	THONY E. DIONES	T
Telefax: 5336-8/10	6 to 07 ldc. 24052 09565162748	Signature Over Printed Name ( Supplier)

Non-VAT

(Signature over Printed name)
Supplier

## Procurement Form No. 04-A (Annex A)



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Note: Prospective supplier must be registered at the Philippine RFQ 2023-02-0265 SHOPPING B Government Electronic Procurement System (PHILGEPS). You may visit the PHILGEPS website at www.philgeps.gov.ph to register Date: ( should be filled up by suppplier) Company Name MOP: SHOPPING B 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 **Unit Cost Total Cost** Qty. Unit **PARTICULARS** No. the statement of compliance either "COMPLY or "NOT COMPLY". "Failure to indicate information could be basis for non-compliance." ICT OFFICE SUPPLIES Printer Ink of Epson L4260 (Magenta, Cyan, Yellow, Black) Set Printer Ink of Epson L15150 (Magenta, Cyan, Yellow, Black) 5 Set 2 3 20 Pcs White Liquid chalk pen marker for glass board 4 10 Pcs Heavy Duty Stapler with staple remover Pcs 5 10 Stick on notes "Sign Here" 6 10 Binder Clip (size 1 inch) Box Binder Clip (size 2 inch) 10 Box 8 10 Box Binder Clip (size 50mm) 9 10 Box Binder Clip (size 33mm) Double Sided Tape 1 inch 10 10 pcs 11 Staple Wire No. 35 26/6 4 Pack Cartridge Ink Tank, Cannon 750 Black XL 12 4 Cartridge Ink Tank, Cannon 751 Black 13 3 Cartridge Ink Tank, Cannon 751 Cyan 14 3 15 3 Cartridge Ink Tank, Cannon 751 Magenta Cartridge Ink Tank, Cannon 751 Yellow 16 Bottle Ink Bottle HP GT51 Black Original 17 2 Ink Bottle HP GT52 Cyan Original 10 18 Bottle 19 10 Bottle Ink Bottle HP GT52 Magenta Original Bottle Ink Bottle HP GT52 Yellow Original 20 10 Ink Bottle HP GT53 XL Black Original 21 10 Bottle 22 5 Cartridge HP Laserjet Pro 79A. Black Tze Tapes Laminated Tape 12mm/.47 23 3 pcs 24 3 Tze Tapes Laminated Tape 24mm/.94 pcs \*\*\* Nothing Follows\*\*\* TOTAL APPROVED BUDGET FOR THE CONTRACT: Eighty Thousand Pesos Only (Php 75,000.00) Note: Please specify brand model/origin . PURPOSE: to be used by ICT Section for the 1st semester 2023-02-0265 SHOPPING B PR No.: VAT

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.