

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

REQUEST FOR QUOTATION

Company Address Contact Person Contact No. Email Address Company TIN PhilGEPS Reg. No. Sir/Madam: Please quote your government price/s including delivery charges, VAT or ot the goods listed in Annex A. Failure to indicate information could be bas brochures, catalogues, literatures and/or samples, if applicable. If you are exclusive manufacturer, distributor, or agent in the Philippines for gadily not an exclusive manufacturer and/or samples, if applicable. If you are exclusive manufacturer, distributor, or agent in the Philippines for gadily not are exclusive manufacturer. Additionally, please attach copies of your Company's Business Permit, Manufacturer and a notarized accordance with the attached format marked as Annex B. If awarded, please accomplish and submit this form together with Annex A to DSWD MIFT. Benitez corner Malvar Sts., Malate, Manila or email to: kernimaropa-py JULY 4, 2023 (Tuesday). Quotations submitted to different email address(e evaluation. Please indicate in the subject of your email the title of the Project Submission]. Terms and Conditions: 1. Award shall be made on per:	er applicable taxes s for non-complian pods listed in Anne: or's Permit , PCAI d or unnotarized O	nce. Also, furnish us with descriptive x A, please attach in your quotation B License (if applicable), Dmnibus Sworn Statement in iately the duly notarized Omnibus
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For goods please indicate brand, model and country of origin.	Accounts Payable Account Num Branch: harged a service f full delivery withi to one-tenth of one sed. Once the cum t, the Procuring Er	ntity may rescind or terminate le under the circumstances.
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10. NOTE: "Prospective supplier must be registered at the Phili (PhilGEPS). You may visit the PhilGEPS website at v	Account Num Account Num Branch: harged a service f full delivery withi to one-tenth of one tend. Once the cum t, the Procuring Er remedies available shall prevail.	e under the circumstances.
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Ma. Kahliel Kristal M. Ferranco	Account Payable Account Num Branch: harged a service full delivery within to one-tenth of one the cumt, the Procuring Erremedies available shall prevail.	e under the circumstances. Electronic Procurement System

Ma. Kanliel Kristal M. Ferranco Telefax: 5336-8106-to 07 loc. 24052 Contact Number: 09456535745/09152653142

Signature Over Printed Name (Supplier)

Procurement Form No. 04-A (Annex A) DSWD MMARGYA REGION			4-A (Annex A)	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 visit the PHILGEPS website at www.philgeps.gov.ph to register				RFQ No. KC-2023-06-0179 Date: (should be filled up by suppplier)						
Compa	ny Name		e.							
			<u>10</u>	MOP: SHOPPING FOR NON-CONSULTING SERVICES						
Company Address : Contact Person : Contact No.										
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PhilGE	S Reg. N	No.	II.							
No.	Qty.	Unit	PA	RTICULARS	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 for	Unit Cost	Total Cost			
CATERING SERVICES FOR 2 MEAL 1 50 PAX MUNICIPAL TRAINING ON BARANG DEVELOPMENT PLANNING			MUNICIPAL TRAINING ON	BARANGAY PARTICIPATORY	non-compliance."					
			Date: JULY 25-28, 2023							
			Venue: SAN AGUSTIN ROM	MBLON	BLON					
	Meals: AM Snack, Lunch, PN		Meals: AM Snack, Lunch, P	M Snack, & Dinner	Snack, & Dinner					
			Guaranted Pax: 40							
			Plated: AM and PM Snacks	(with cold beverage)						
			Buffet: Lunch (Minimum of 3 and cold drinks, no repetition	3 viands with soup, desserts/fruits of meals)						
			Packed: Dinner (Minimum o and cold drinks, no repetition	f 3 viands with soup, desserts/fruits n of meals)						
			··· NOTH	HING FOLLOWS ***						
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			Annual D	idget for the Contract)					
		Approved Budget for the Contract One Hundred Sixty Thousand Pesos Only								
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PURPO PR No.	The state of the s	DEVEL	PURCHASE REQUEST FOR CATERING SERVICES FOR THE CONDUCT OF MUNICIPAL TRAINING ON BARANGAY PARTICIPATORY DEVELOPMENT PLANNING ON SAN AGUSTIN, ROMBLON KC-2023-06-0179							
		ARRESTS	gyaarinataan (1994)		(Signature over Printed name) Supplier	8	VAT Non-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. 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.



REQUEST FOR QUOTATION RECEIVING FORM

Hereby certify that I		of
		has received the Request for
Quotation RFQ No.	KC-2023-06-0179	from DSWD MIMAROPA Region intended for the
	#807 BB BB #10 FB BB #10 FB #10 FB #10 FB	ES FOR THE CONDUCT OF MUNICIPAL TRAINING ON NNING ON SAN AGUSTIN, ROMBLON
Certified by:		
(Signature Over Printed N Contact: Email Address:	ame of Supplier)	
RFQ Delivered by:		
(Signature Over Printed N Position: Date / Time of Delivery:	ame of Canvasser)	
Note: This form shall be u provider.	sed and issued in cases whe	n RFQ is personally delivered to prospective supplier/service