

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region

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

## REQUEST FOR QUOTATION

				RFQ No.: Date:	July 12, 2023
Company Name	:				
Company Address	:				
Contact Person	:				
Contact No.	<u> </u>				
Email Address	3				
Company TIN	7				
PhilGEPS Reg. No.	*				
Sir/Madam:	<u> </u>		<del></del> 5		
	ds listed in Anne	x A. Failure to i	indicate informatio	n could b	licable taxes, and other incidental te basis for non -compliance. Also, cable,
If you are exclusive r quotation a duly not			in the Philippines fo	or goods lis	sted in Annex A, please attach in your
PhilGEPS Certificat Statement in accorduly notarized Omnil	te, latest Income dance with the a bus Sworn Staten	/Business Tax F ttached format in nent (if previously	Return and a notari marked as Annex I y submitted is unnot	ized or un 3. If award tarized. Th	ermit , PCAB License (if applicable), inotarized Omnibus Sworn led , please submit immediately the he Certificate of Platinum
Floor 1680 F.T. Ben later than 5:00 PM	itez corner Malva on July 19, 2023 red for evaluation	Sts., Malate, Ma (Wednesday). C Please indicate	anila <u>or email to: pr</u> Quotations submitted	to differe	PA Region -BAC Secretariat at 2nd nt.fomimaropa@dswd.gov.ph not ant email address(es) as stated above title of the Project using this format:  Very truly yours,
Terms and Conditi	ons:		200	Ad	ministrative Officer V
1. Award shall be	made on per:	item basis	x total quote	d price	lot basis
2. Price Validity sh	all be valid until: O	ne Hundred Twe	nty (120) Calendar o	days	
			ar Days upon receipt	t of Approv	ved Purchase Order (PO)
<ol> <li>Place of Deliver</li> <li>Terms of Payme</li> </ol>			inspection and acc	eptance	
			mandable Accounts	Payable- A	Advice to Debit Account)
Account Name	·			Account N Branch:	lumber:
Bank Name: **Note: Non La	and Bank of the Ph	ailippines accoun	ts shall be charged		ee
6. Liquidated Dam	ages/Penalty:	In case of failur	re to make full delive	ery within t	he time specified above,
the amount of	the liquidated dan	nages shall be at	least equal to one-te	enth of one	e percent (0.001) of the cost of ulative amount of liquidated
damages reac	hes ten percent (1	0%) of the amour	nt of contract, the Pr	ocuring Er	ntity may rescind or terminate
the contract w	ithout prejudice to	other courses o	f action and remedie	es available	e under the circumstances.
	se indicate brand, r enancy between ur		of origin. ost, unit cost shall pre-	vail	
9. Please indicate	warranty:				
					onic Procurement System
Phile	SEPS). You may vis	t the PhilGEPS wel	bsite at www. philgeps	s.gov.ph to	ledistet
DAVE	T. CORCORO				
	urement Officer				Signature Over Printed Name
Telefax; 533	6-8106 to 07 loc. 24	4052			(Supplier)

## DSWD MIMAROPA REGION

## 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.: 2023-07-0918 NP-SVP

manu N			Date:(		supplier)
mpany N	,	<u> </u>	MOP: NP-SVP		
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ntact Per		<u> </u>			
ntact No		<u> </u>			
nail Addr	ess	:			
mpany T	IN	·			
ilGEPS F	ea. No.	•			
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em No. Qty.	Unit		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 non-compliance"	Unit Cost	Total Cost
1 300	bundle	LOOSELEAF COVER, Made of Chipboard, Legal size, 50pcs/bundle			
		>>>> NOTHING FOLLOWS <<<<<			
		Date of Delivery: Thirty (30) Calendar Days upon receipt of approved			
		Purchase Order (PO)			
- 00	h	Areas of Delivery & Breakdown of Quantities: DSWD FIELD OFFICE MIMAROPA			
20	bundle	Address: 1680 F.T. Benitez cor. Malvar Sts., Malate, Manila			
	+	Contact Person: MS. IRIS M. EYAS			
		Contact Number: 0917-109-4147			
60	bundle	SWADT ORIENTAL MINDORO			
-	-	Address: 2F RKT Bldg. Bayabas St., Lalud, Calapan City, Oriental Mindoro Contact Person: MS. SEVERINA G. BOONGALING			
_		Contact Number: 0908-290-1003	5-		
40 bundle	SWADT OCCIDENTAL MINDORO				
	-	Address: M.H. Del Pilar St., Brgy. 7, San Jose, Occidental Mindoro			
_		Contact Person: MS. SHEILA D. SARABIA Contact Number: 0915-959-8195			
		Ontact (tallibo), 00 to 000 of to			
50	bundle	SWADT MARINDUQUE			
		Address: Capitol Compound, Brgy. Bangbangalon, Boac, Marinduque			
	Contact Person: MS, HELEN B, ALCOBA Contact Number: 0961-333-1372				
		Contact Number: 0901-333-1372			
40	bundle	SWADT ROMBLON			
		Address: Servañez Bldg., Brgy. Liwayway, Odiongan, Romblon			
		Contact Person: MS. ABEGAIL F. FETILO			
	+	Contact Number: 0998-915-8120			
90 bund	bundle	SWADT PALAWAN			
		Address: Rizal Ave. Ext. cor. P. Abrea Rd., Brgy. Bancao-Bancao,			
		Puerto Princesa City, Palawan			
	_	Contact Person: MR. ERIC P. ABOROT  Contact Number: 0977-856-0040			
_		Contact Number: 0977-656-0040		113	
	1	TOTAL APPROVED BUDGET FOR THE CONTRACT	<b>\</b>		
	+	Six Hundred Thousand Pesos Only	/		
		(Php 600,000.00)	Note: Please specify brand model/origin.		
			Note. Please specify brand moderorigin.		
		PAGE 1 OF 1			

(Signature over printed name) Supplier