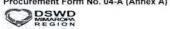


DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office MiMaRoPa Region 1680 F.T. Benitez corner Malvar Sts., Malate, Manila

REQUEST FOR QUOTATION

		RFQ No	KC-2023-08-0273
		Date:	August 30, 2023
Company Name	<u> </u>		
Company Address		, n	
Contact Person	2		
Contact No.	3.4	_	
Email Address	· ·	 8	
	2	_	
Company TIN	# 	_	
PhilGEPS Reg. No.	2		
Sir/Madam:			
expenses for the good	vernment price/s including delivery charges listed in Annex A . <u>Failure to indicate</u> stive brochures, catalogues, literatures a	e information could be b	asis for non -compliance. Also,
	anufacturer, distributor, or agent in the Fized certification to this effect.	Philippines for goods listed	in Annex A, please attach in your
PhilGEPS Certificate in accordance with to Omnibus Sworn State	tach copies of your Company's Busine t, latest Income/Business Tax Return he attached format marked as Annex ment (if previously submitted is unnotari the Mayor's /Business Permit and PHILGE	and a notarized or unno B. If awarded , please sub zed. The Certificate of P	tarized Omnibus Sworn Statement omit immediately the duly notarized
1680 F.T. Benitez con September 4, 2023 (M	d submit this form together with Annex Anner Malvar Sts., Malate, Manila or email Monday). Quotations submitted to differentiate in the subject of your email the title	I to: samdomingo@dsweent email address(es) as s	d.gov.ph not later than 5:00 PM on stated above shall not be considered for format: [RFQ Number], [Deadline of
		Adi	ARVY B. CALABIO ministrative Officer V urement Section Head
Terms and Condition			
 Award shall be r Price Validity sh 	made on per:item basis all be valid until: <u>One Hundred Twenty</u>	X total quoted price (120) Calendar days	lot basis
3. Services shall b	e delivered on: 7-15 days upon recei	pt of approved P.O	
4. Place of Deliver			Sts., Malate, Manila
	ent: within 30 days upon final inspect th LDDAP-ADA (List of Due and Dema	indable Accounts Payab	le- Advice to Debit Account)
Bank Name:		Branch	
**Note: Non La	and Bank of the Philippines accounts	shall be charged a servi	ce fee
Liquidated Dam the amount of	ages/Penalty: In case of failure to the liquidated damages shall be at lea		in the time specified above,
the unperforme	ed portion for every day of delay shal	I be imposed. Once the	cumulative amount of liquidated
damages reach	nes ten percent (10%) of the amount of	of contract, the Procuring	g Entity may rescind or terminate
	ithout prejudice to other courses of a se indicate brand, model and country of		able under the circumstances.
In case of discre	epancy between unit cost and total cost,		
9. Please indicate		A AL- DENI-LE C	ment Electronic Programment Suntan
(Phil	SEPS). You may visit the PhilGEPS w		ment Electronic Procurement System .gov.ph to register "
SHEIWE A	NN M. DOMINGO		
Proce	rement Officer		
Telefax: 5336-8106 Contact Number:			Signature Over Printed Name (Supplier)
Contact Mulliper:	00 10-1 00-1 04 1		(outbliet)



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Note: Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PHILGEPS). You may visit the PHILGEPS

Field Office MiMaRoPa Region						
1680 F.T. Benitez corner Malvar Sts., Malate, Manila						

RF(KC-2023-08-0273

Date:	should be	e filled	up by	suppoli

MOP: SHOPPING FOR GOODS

Company Name	3
Company Address	3
Contact Person	
Contact No.	:
Email Address	
Company TIN	1
DEIICEDE Des No	<u> </u>

em lo.	Qty.	Unit	PARTICULARS	Bidder's Specifications (Please fill out the specifications in the space provided) NOTE: Supplier must state here either the	Unit Cost	Total Cost
1	4	piece	File Organizer 2 layers			
2	4	piece	Tape dispenser			
3	10	roll	TAPE, MASKING, width: 24mm (±1mm)			
4	10	roll	TAPE, PACKAGING, width: 48mm (±1mm)			
5	10	roll	TAPE, TRANSPARENT, width, 24mm (±1mm)			
6	4	piece	Scissor, 180 mm			
7	4	Box	Stapler (medium)			
8	4	piece	Stamp pad with ink			
9	2	piece	Glue (1010g)	110 0101 99 90 0101 7 20 20 20 20 20 20 20 20 20 20 20 20 20		
10	4	piece	Self-Inking Dater stamp, 4mm			
11	5	Box	Paper Fastener, Plastic, Standard Size			
12	50	piece	Paper binder clip size 25mm			
13	50	box	Paper binder clip size 32mm			
14	30	box	Paper binder clip size 51mm			
15	5	piece	RECORD BOOK, 500 PAGES, size: 214mm x 278mm min			
16	20	box	SIGN PEN, BLACK, liquid/gel ink, 0.5mm needle tip, 12s / box			
17	20	box	SIGN PEN, BLUE, liquid/gel ink, 0.5mm needle tip, 12s / box			
18	20	box	MARKER PEN, Permanent, Black, 12s / box			
19	10	pack	Highlighter Marker pen (assorted colors), 3pcs / pack			
20	10	ream	PAPER, MULTICOPY, 80gsm, size: 216mm x 330mm (Legal).			
21	10	ream	PAPER, MULTICOPY, 80gsm, size: 210mm x 297mm (A4)			
22	100	piece	White File Folder, Short size			
23	2,500	piece	White File Folder, Long size			
24	350	piece	Expandable Folder, 9.5 inches x 13.5 inches, Red, Blue or green color only			
-0.011	(V000/	72			-	
25	100	piece	ENVELOPE, Expanding, legal, 380MM x 250 mm, with string and eyelet or elastic strap			
26	100	piece	Brown Envelope, Long Size		1	
27	100	piece	Brown Envelope, Short Size			
28	20	box	Paper clips, vinyl regular size 50mm			
29	20	piece	Plastic envelop with handle, expanding, legal size, push lock, transparent			
30	50	packs	Sign Here sticky notes, one pack has 5 colors approx 100pcs per pack, neon translucent type sticky note signs			
31	50	piece	Magazine File Box, Carboard material, Dimension: 15.5 x 4.5 x 9.5, green color only			
32	3	piece	Trodat Dat with customized name (S-223 ma.18x47 mm/ 3/4"x1-7/8"), Font (Arial Narrow) Font Size (12) 1. Ma. Angelica M. Latorena,RSW BP2P- Social Welfare Officer KALAHI- CIDSS 2. Maria Paula N. Naga,RSW BP2P-Social Welfare Officer KALAHI- CIDSS 3. Jessica V. Batan BP2P- Project Development Officer Sustainable Livelihood Program			
33	50	pack	Parchment Paper, A4 size, 10 sheets per pack, 90 gsnm			
34	4	piece	Hard cover notebook, A5 size, assorted color, atleast 100 sheets, with strap			
			TOTAL APPROVED BUDGET FOR THE CONTRACT: One Hundred Twenty-Five Thousand Five Hundred Forty Pesos only (Php 125,540.00)			
				Note: Please specify brand model/origin .		

PR No.:

KC-2023-08-0273

over Printed name) Supplier	



provider.

REQUEST FOR QUOTATION RECEIVING FORM

Hereby certify that I	15-11-11-11	
		has received the Request for
Quotation RFQ No.	KC-2023-08-0273	from DSWD MIMAROPA Region intended for the
Office Supplies for B	alik Probinsya Bagong Pa	g-asa Program
Certified by:		
(Signature Over Printe	d Name of Supplier)	
Contact: Email Address:		
RFQ Delivered by:		
Position:	d Name of Canvasser)	*
Date / Time of Delivery	<i>r</i> :	

Note: This form shall be used and issued in cases when RFQ is personally delivered to prospective supplier/service

LAY OUT FOR SELF INKING STAMPS

Font Style: Arial Narrow

	Size
MA. ANGELICA M. LATORENA, RSW BP2P – Social Welfare Officer KALAHI-CIDSS	12 11
MARIA PAULA N. NAGA, RSW BP2P – Social Welfare Officer KALAHI-CIDSS	9
JESSICA V. BATAN 12 BP2P – Project Development Officer 12 Sustainable Livelihood Program	