

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office MiMaRoPa Region

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

## REQUEST FOR QUOTATION

Company Name Company Name Company Address Contact Person Contact Person Contact Person Contact No Email Address Contact Person Sir/Madam: Please quote your government price/s including delivery charges. VAT or other applicable taxes, and other incidental expenses for the process listed in Annex A. Failure to indicate information could be basis for non-compliance. Also, furnish us with descriptive brochures, catalogues, literatures anc/or samples, if applicable.  If you are exclusive manufacturer, distributor, or agent in the Philippines for goods listed in Annex A. please attach in your quotation a duly notarized certification to this effect.  Additionally, please attach copies of your Company's Business Permit, Mayor's Permit, PCAB License (if applicable), PhilidEPS Certificate, latest income Business Tax Return and a notarized or innotarized Ormitious Swom Statement in accordance with the attached format marked as Annex B. if awarded please submit inmodales the duly notarized Ornibus Swom Statement in accordance with the attached format marked as Annex B. if awarded please submit inmodales the duly notarized Ornibus Swom Statement in accordance with the attached format marked as Annex B. if awarded please submit inmodales the duly notarized Ornibus Swom Statement in accordance with the attached format marked as Annex B. if awarded please submit inmodales the duly notarized Ornibus Swom Statement in accordance with the attached format marked as Annex B. if awarded please submit inmodales the duly notarized Ornibus Swom Statement in accordance with the advanced or interest and provided to the Mayor's flushing Provided Prov			RFQ No	2023-08-1054	NP-SVP
Company Address  Contact No  Email Address  Company TIN  PhilicEPS Reg. No.  Sir/Madam:  Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. Failure to indicate information could be basis for non -compliance. Also, furnish us with descriptive brochures, catalogues, literatures and/or samples, if applicable.  If you are exclusive manufacturer, distributor, or agent in the Philippines for goods listed in Annex A. please attach in your quotation a duly notarized certification to this effect.  Additionally, please attach copies of your Company's Business Permit, Mayor's Permit, PCAB License (if applicable), PhiliGEPS Cartificate, latest income/Business Tax Return and a notarized or unnotarized Omnibus Swom Statement in accordance with the attached format marked as Annex B. If awardied, please submit immediately the duly notarized formibus Swom Statement (if previously submitted is unnotarized. The Cartificate of Platinum Membership maybe submitted in lieu of the Mayor's /Business Permit and Phill.GEPS Registration Number.  Please accomplish and submit this form together with Annex A to DSWD MIMAROPA Region -BAC Secretariat at 2nd Floor 1880 F.T. Benize comer Malvar Sts. Mailate, Manila or email to: cervictorio@dswd.gov.pth not later than 5:50 PM on August 14, 2023(Monday). Quotations submitted to different email address(es) as stated above shall not be considered for evaluation. Please indicate in the subject of your email the title of the Project using this format: [RFQ Number ], Deadline of Submission!  Yery Iruly yours.  **Terms and Conditions:**  1. Award shall be delivered on: the scheduled dates of the activity  All Place of Delivery. DSWO MIMAROPA F 0669 F.T. Benizes Sts. of Malvar Sts., Malate, Manila  5. Terms of Payment: within 30 days upon final inspection and acceptance.  Payment through LDDAP-ADA (List of Due and Demandable Accounts Payable- Advice to Debit Account)  Account Name:  Bank Name:  Bar			Date:	August 7, 2023	
Company Address  Contact No  Email Address  Company TIN  PhilicEPS Reg. No.  Sir/Madam:  Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. Failure to indicate information could be basis for non -compliance. Also, furnish us with descriptive brochures, catalogues, literatures and/or samples, if applicable.  If you are exclusive manufacturer, distributor, or agent in the Philippines for goods listed in Annex A. please attach in your quotation a duly notarized certification to this effect.  Additionally, please attach copies of your Company's Business Permit, Mayor's Permit, PCAB License (if applicable), PhiliGEPS Cartificate, latest income/Business Tax Return and a notarized or unnotarized Omnibus Swom Statement in accordance with the attached format marked as Annex B. If awardied, please submit immediately the duly notarized formibus Swom Statement (if previously submitted is unnotarized. The Cartificate of Platinum Membership maybe submitted in lieu of the Mayor's /Business Permit and Phill.GEPS Registration Number.  Please accomplish and submit this form together with Annex A to DSWD MIMAROPA Region -BAC Secretariat at 2nd Floor 1880 F.T. Benize comer Malvar Sts. Mailate, Manila or email to: cervictorio@dswd.gov.pth not later than 5:50 PM on August 14, 2023(Monday). Quotations submitted to different email address(es) as stated above shall not be considered for evaluation. Please indicate in the subject of your email the title of the Project using this format: [RFQ Number ], Deadline of Submission!  Yery Iruly yours.  **Terms and Conditions:**  1. Award shall be delivered on: the scheduled dates of the activity  All Place of Delivery. DSWO MIMAROPA F 0669 F.T. Benizes Sts. of Malvar Sts., Malate, Manila  5. Terms of Payment: within 30 days upon final inspection and acceptance.  Payment through LDDAP-ADA (List of Due and Demandable Accounts Payable- Advice to Debit Account)  Account Name:  Bank Name:  Bar	Company Name	2			
Contact No.  Email Address  Company TIN  PhiloEPS Reg. No.  Sir/Madam:  Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. Failure to indicate information could be basis for non-compliance. Also, furnish us with descriptive brochures, catalogues, literatures and/or samples, if applicable.  If you are exclusive manufacturer, distributor, or agent in the Philippines for goods listed in Annex A. please attach in your quotation a duly notarized contification to this effect.  Additionally, please attach copies of your Company's Business Permit, Mayor's Permit, PCAB License (if applicable), PhiliGEPS Contificate, latest income/Business Fax Return and a notarized or unnotarized Omnibus Sworn Statement in accordance with the attached format marked as Annex B. If awarded , please submit immediately the duly notarized Omnibus Sworn Statement in accordance with the attached format marked as Annex B. If awarded , please submit immediately the duly notarized Omnibus Sworn Statement (if previously submitted is unnotarized. The Certificate of Platinum Membership maybe submitted in lieu of the Mayor's /Business Permit and Phili. DEPS Registration Number.  Please accomplish and submit this form together with Annex A to DSWD MIMAROPA Region -BAC Secretariat at 2nd Floor 1680 F.T. Benitez corner Malvar Sts., Malate, Manila or gmail tog: cervictorio@dwd.gov.ph not later than 5:00 PM on August 14.  Please of Delivery DSWD MIMAROPA FO 1680 F.T. Benitez St. port Malvar Sts., Malate, Manila or gmail tog: cervictorio@dwd.gov.ph not later than 5:00 PM on August 14.  Procurement Section Head  Terms and Conditions:  1. Award shall be made on per: Interm basis indicate in the subject of your email the title of the Project using this format: [RFQ Number ], [Deadline of Submission]  Very truly yours.  **Harvy B. CALABIO**  Administrative Officer V Procurement Section Head  Terms and Conditions:  1. Award shall be made on per: Interm ba	77 (2)				
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Email Address  Company TIN  PhiloEPS Reg. No.  Sir/Madam:  Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. Fallure to indicate information could be basis for non -compliance. Also, furnish us with descriptive brochures, catalogues, literatures and/or samples, if applicable and up to the consideration to this effect.  If you are exclusive manufacturer, distributor, or agent in the Philippines for goods listed in Annex A. please attach in your quotation a duly notarized certification to this effect.  Additionally, please attach copies of your Company's Business Permit, Mayor's Permit , PCAB License (if applicable), PhiliGEPS Certificate, latest income/Business Tax Return and a notarized or unnotarized Ornmbus Sworn Statement in accordance with the attached format marked as Annex B if awarded . please submit immediately the duly notarized Ornmbus Sworn Statement and Phil.CEPS Registration Number.  Please accomplish and submit this form together with Annex A to DSWD MIMAROPA Region -BAC Secretarial at 2nd Floor 1880 F.T. Benitez corner Malvar Sts., Malate, Mania or grantl to: cervictorio@dewid.gov.gb not later than 5:00 PM on August 14, 2021/Montary, Colorations submitted to different email address(s) as stated above shall not be considered for evaluation. Please indicate in the subject of your email the title of the Project using this format. [RFO Number I, Deadline of Submission]  Very truly yours.  1. Award shall be made on per:	G V	*			
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Terms and Conditions:  1. Award shall be made on per:item basis	Benitez corner Malv. 2023(Monday). Quota	ar Sts., Malate, Manila or email to: ccrvictorio@ ations submitted to different email address(es) as st	odswd.gov.ph not ated above shall not	later than <u>5:00</u> t be considered fo	PM on August 14, r evaluation. Please
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6. Liquidated Damages/Penalty: In case of failure to make full delivery within the time specified above, the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay shall be imposed. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of contract, the Procuring Entity may rescind or terminate the contract without prejudice to other courses of action and remedies available under the circumstances.  7. For goods please indicate brand, model and country of origin. 8. In case of discrepancy between unit cost and total cost, unit cost shall prevail. 9. Please indicate warranty: 10. NOTE: "Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PhiloGEPS). You may visit the PhiloEPS website at www. philogeps.gov.ph to register "  CATHERINE CATHY R. VICTORIO Procurement Officer  Telefax: 5336-8196 to 07 loc. 24052  Signature Over Printed Name		nd Bank of the Philippines accounts shall be charg			
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No.	Qty.	Unit	PARTICULARS	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". "Fallure to indicate information could be	Unit Cost	Total Cost
			Catering Service for 8 days (1 meal; 2 snacks)			
			Skills Enhancement Session on Microsoft Excel and Google Workshop			
			Venue: DSWD MIMAROPA FO 1680 F.T. Benitez St. cor Malvar St., Malate, Manila			
		_	Dates:			
1	35	pax	Skills Enhancement Session on Microsoft Excel (2nd Batch)			
30 gu	arantee	d pax	September 5-6, 2023			
1	35	pax	Skills Enhancement Session on Google Workplace (1st Batch)			
30 gu	arantee	d pax	September 13-14, 2023			
1	45	pax	Orientation on DSWD FO MIMAROPA Queuing System and Interactive Klosk			
40 gu	arantee	d pax	October 12-13, 2023			
1	35	pax	Skills Enhancement Session on Google Workplace (2nd Batch)			
	arantee	1	November 16-17, 2023			
			T			
			Type and time of serving: Managed Buffet  AM snack: (10:00 AM)			
			Pasta with bread, Cheese burger with fries, canned or bottled beverages or other pinoy delicecies			
De Line			Lunch: (12:00 NN)			
_		3	Soup, rice, vegetable dish, 2 meat or seafood dish, dessert PM snack: (3:00 PM)			
			Pasta with bread, Cheese burger with fries, canned or bottled beverages or other pinoy delicecies			
			Notes			
			Provision of overflowing coffee			
			Stand-by waiter/crew during the duration of activity     Diet restrictions: NO PORK			
			***nothing follows***			
			TOTAL APPROVED BUDGET FOR THE CONTRACT:	Note: Please specify		
-			One Hundred Fifty Thousand Pesos Only (Php 150,000.00)	brand model/origin .		
	_	_	A Control of the Cont			

(Signature over Printed name) Supplier

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 <u>AILURE to show up and sign the original P.O. means</u> the bidder is not interested and will be ground for suspension or blacklisting in DSWD's future biddings.