



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

REQUEST FOR QUOTATION

RFQ No. **2023-10-1286 SHOPPING B**

Date: **October 11, 2023**

Company Name : _____
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 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), PhilGEPS Certificate, latest Income/Business Tax 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 (if previously submitted is unnotarized). The **Certificate of Platinum Membership** maybe submitted in lieu of the Mayor's /Business Permit and PHILGEPS 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 email to: procurement.fomimaropa@dswd.gov.ph and maediones@dswd.gov.ph not later than 5:00 PM on October 18, 2023 (Wednesday).** 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]**.

Very truly yours,

HARVEY B. CALABIO
Administrative Officer V
Procurement Section Head

Terms and Conditions:

- Award shall be made on per: ☐ item basis ☒ total quoted price ☐ lot basis
- Price Validity shall be valid until: **One Hundred Twenty (120) Calendar days**
- Services shall be delivered on: **15 CD after receipt of approved Purchase Order**
- Place of Delivery: **DSWD MIMAROPA (1680 F.T. Benitez cor. Malvar St., Malate, Manila)**
- 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: _____ Account Number : _____
Bank Name: _____ Branch: _____
****Note: Non Land Bank of the Philippines accounts shall be charged a service fee**
- 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.**
- For goods please indicate brand, model and country of origin.
- In case of discrepancy between unit cost and total cost, unit cost shall prevail.
- Please indicate warranty:
- 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"**

MARK ANTHONY E. DIONES

Telefax: 5336-8106 to 07 loc. 24052
Contact Number: 09565162748

Signature Over Printed Name
(Supplier)



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RFQ 2023-10-1286 SHOPPING B

Date: _____ (should be filled up by supplier)

Company Name	:	
Company Address	:	
Contact Person	:	
Contact No.	:	
Email Address	:	
Company TIN	:	
PhilGEPS Reg. No.	:	

MOP: SHOPPING B

Item 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". "Failure to indicate information could be basis for non-compliance."	Unit Cost	Total Cost
1	50	ream	PAPER, MULTICOPY, 80gsm, size: 210mm x 297mm (A4)			
2	100	ream	PAPER, MULTICOPY, 80gsm, size: 216mm x 330mm (Legal)			
3	30	Roll	TAPE, TRANSPARENT, width: 48mm			
4	50	Roll	TAPE, TRANSPARENT, width: 24mm			
5	30	Roll	TAPE, PACKAGING width: 48mm (±1mm)			
6	20	Roll	DOUBLE SIDED TAPE 3meters			
7	240	Piece	CORRECTION TAPE: 6METERS (min) Individual pack			
8	60	Piece	SIGN PEN, BLACK, 0.5mm, Black			
9	48	Piece	SIGN PEN, BLUE, 0.5mm, Blue			
10	48	Piece	SIGN PEN, BLACK, 0.7mm, Black			
11	48	Piece	SIGN PEN, BLUE, 0.7mm, Blue			
12	30	box	STAPLE WIRE, Standard			
13	60	Piece	PENCIL #2, 12pcs per box			
14	10	Piece	MULTI-PURPOSE GLUE, 473ml			
15	36	Piece	WHITE BOARD MARKER, Black 1.0mm			
16	36	Piece	WHITE BOARD MARKER, Red 1.0mm			
17	36	Piece	WHITE BOARD MARKER, Blue 1.0mm			
18	36	Piece	PERMANENT MARKER, Black, 1.0mm			
19	36	Piece	PERMANENT MARKER, Red, 1.0mm			
20	36	Piece	PERMANENT MARKER, Blue, 1.0mm			
21	10	Box	BINDER CLIP, Black 3/4", 12pcs/box			
22	10	Box	BINDER CLIP, Black 1", 12pcs/box			
23	10	Box	BINDER CLIP, Black 1 1/4", 12pcs/box			
24	20	Piece	STAND FILE BOX, Black			
25	10	Piece	DOCUMENT TRAY FILE ORGANIZER, Black, 3-Layer			
26	10	Piece	ELECTRONIC CALCULATOR, 12 Digits			
27	50	Piece	SIGN HERE TRANSPARENT ARROW FLAG STICKY NOTE			
28	10	Piece	STAMP PAD, No.1 Without Ink			
29	10	Piece	STAMP PAD INK, Violet, 30ml			
30	5	Piece	RECORD BOOK, 500 PAGES size: 214mm x 278mm min			
31	5	Piece	RECORD BOOK, 200 PAGES size: 214mm x 278mm min			
			*** Nothing Follows***			
			TOTAL APPROVED BUDGET FOR THE CONTRACT:			
			Ninety-Nine Thousand Eight Hundred Ninety Pesos Only			
			(Php 99,890.00)			
				Note: Please specify brand model/origin .		

PURPOSE:	PURCHASE OF OFFICE SUPPLIES FOR THE USE OF CIS REGIONAL OFFICE FOR 4TH QUARTER CY 2023
PR No.:	2023-10-1286 SHOPPING B

☐ VAT
☐ Non-VAT

(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. **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.**