

Telefax: 5336-8106 to 07 toc. 24052

Contact Number: 09565162748

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

REQUEST FOR QUOTATION

		RFQ No. 2024-10-1027 SHOPPING B Date: October 25, 2024
Company Name	4	
Company Address	<u>2</u>	_
Contact Person		 -
Contact No.		_
Email Address	- 10 - 10	_
	*	
Company TIN	¥8	
PhilGEPS Reg. No.		
Sir/Madam:		
expenses for the goo furnish us with descri	ds listed in Annex A. Failure to indica ptive brochures, catalogues, literatures	N 7 W3X
	nanufacturer, distributor, or agent in the arized certification to this effect.	Philippines for goods listed in Annex A, please attach in your
PhilGEPS Certificat accordance with the Omnibus Sworn State	e, latest Income/Business Tax Return e attached format marked as Annex E	ness Permit, Mayor's Permit , PCAB License (if applicable), n and a notarized or unnotarized Omnibus Sworn Statement in B. If awarded , please submit immediately the duly notarized arized. The Certificate of Platinum Membership maybe SEPS Registration Number.
1680 F.T. Benitez co maediones@dswd.g address(es) as state	rner Malvar Sts., Malate, Manila <u>or em</u> gov.ph not later than <u>5:00 PM on Nov</u>	x A to DSWD MIMAROPA Region -BAC Secretariat at 2nd Floor ail to: procurement.fomimaropa@dswd.gov.ph and ember 1, 2024 (Friday). Quotations submitted to different email sluation. Please indicate in the subject of your email the title of the bmission! Very truly yours,
Terms and Condition	ons:	HARVY B. CALABIO Administrative Officer V Proeurement Section Head
	hall be valid until: One Hundred Twen	X total quoted price lot basis nty (120) Calendar days ar days upon receipt of approved Purchase Order (P.O)
4. Place of Delive	ery: DSWD MIMAROPA (1680 F.T. I	Benitez cor. Malvar St., Malate, Manila)
	ment: within 30 days upon final insp	nandable Accounts Payable- Advice to Debit Account)
	e:	
Bank Name:_	and Bank of the Bellin to a second	Branch:
6. Liquidated Dar	and Bank of the Philippines account mages/Penalty: In case of failure	s snall be charged a service lee to make full delivery within the time specified above,
the amount of	f the liquidated damages shall be at I	east equal to one-tenth of one percent (0.001) of the cost of
		all be imposed. Once the cumulative amount of liquidated
		t of contract, the Procuring Entity may rescind or terminate action and remedies available under the circumstances.
	ase indicate brand, model and country of	
8. In case of disc	repancy between unit cost and total cos	
9. Please indicate		Jasaka Bhillianina Carana at Electronia B
		d at the Philippine Government Electronic Procurement System website at www. philgeps.gov.ph to register "
MARK	NTHONY E DIONES	

Signature Over Printed Name (Supplier)



Contact No. Email Address Company TIN

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

Company Name

Company Address

Contact Person

RFQ No. 2024-10-1027 SHOPPING B

MOP: SHOPPING B

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 basis for noncompliance."	Unit Cost	Total Cost
1	50	Set	Arrow Flag/Note, Sign here, Adhesive, Assorted Colors			
2	100	Piece	Ballpoint Pen Black 0.5			
3	100	Piece	Ballpoint Pen Blue 0.5			
4	10	Pack	Battery, Dry Cell. Size AA (2pcs/pack)			
5	10	Pack	Battery, Dry Cell. Size AAA (2pcs/pack)			
6	15	Piece	Calculator, 12 Digits			
7	1	Piece	Cartridge Toner, HP LaserJet 48A			
8	20	Piece	Certificate Holder, A4 size, Color Green			
9	20	Piece	Rollerball pen. 0.5mm hybrid needle tip, Water proof, Black			
10	20	Piece	Rollerball pen. 0.5mm hybrid needle tip, Water proof, Blue			
11	20	Box	Clip Backfold, 19mm			
12	20	Box	Clip Backfold, 32mm			
13	100	Piece	Correction Tape8 Meters			
14	4	Piece	Cutter Retractable			
15	10	Piece	Data File Box			
16	5	Box	Fastener			
17	3	Piece	Flash Drive 16 GB			
18	2	Boxes	Folder, Press Board, White			
19	5	Piece	Air Freshener, Gel Lime, Fresh Lime Scent, 70G			
20	10	Jar	Glue All Purpose			
21	20	Piece	Gue Stick, All Purpose Glue, Non toxic, 0.21 oz/6grams			
22	18	Sets	Ink HP 938 (Black, Magenta, Cyan, Yellow)			
23	10	Piece	Ink Bottle Epson 003 Black			
24	10	Cart	Ink Cartridge, HP678 Black			
25	2	Cart	Ink Cartridge, HP678 Tri-color			
26	5	Cart	Ink Cartridge, HP680 Tri-color			
27	10	Cart	Ink Cartridge, HP680 Black			
28	10	Piece	Ink, Epson L565, 664 Black			
29	10	Set	Marker, Flourescent type, 3 colors per set			
30	50	Piece	Marker, Permanent, Black			
31	20	Piece	Marker, Permanent, Blue			
32	30	Piece	Marker, Whiteboard, Black			V
33	20	Piece	Marker, Whiteboard, Blue			
34	29	Piece	Marker, Whiteboard, Red			
35	3	Piece	Mouse Wireless			
			PAGE 1 OF 2			
				Note: Please specify brand model/origin .		

PURPOSE: PR No.: Office Supplies and Materials for the use of all Division in DSWD FO MIMAROPA for the 4th Quarter of 2024

2024-10-1027 SHOPPING B

		AT on-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. F AILURE 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.



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. 2024-10-1027 SHOPPING B					
Webbite at		ipa.gov.pn	v regiotal	Date:		(should be filled up by	suppplier)
Compan	y Name		<u>r </u>	MOP:	SHOPPING B		
Compan	y Address		3				
Contact	Person						
Contact	No.		1				
Email Ad	dress		· · · · · · · · · · · · · · · · · · ·				
Compan			4				
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PhilGEP	S Reg. No.	Š.	L				
No.	Qty.	Unit	PARTICULARS	(Please fill out the space NOTE: Supplier mu statement of compl or "NOT COMPLY information cou	specifications specifications in the provided) st state here either the liance either "COMPLY ", "Failure to indicate ld be basis for non- pliance."	Unit Cost	Total Cost
36	12	Pack	Note Pad, 3" x 2"				
37	12	Pack	Note Pad, 3" x 3"				
38	12	Pack	Note Pad, 3" x 4"				
39 40	150 5	Ream	Paper, Multicopy A4 80gsm Paper, Parchment, A4, 85gsm 100Pieces per ream			-	
41	10	Ream	Scrissors, Symmetrical/Asymmetrical				
42	30	Piece	Sign Pen 0.7 Black				
43	30	Piece	Sign Pen 0.7 Blue				
44	15	Box	Staple Wire, Standard				
45	1	Piece	Stapler, Heavy Duty				
46	5	Piece	Stapler, Standard #35				
47	10	Piece	Storage Box 87L				
48	30	Piece	Cassette, Laminated, 24mm, Black on white Tape 8mm				17211111
49	3	Piece	Tape Dispenser, 1", Table Top				
50	20	Piece	Tape Double Adhesive 1"				
51	10	Piece	Tape, Masking, 24mm 50 meters				
52	30	Piece	Tappe, Transparent, 24mm 50 meters				
53	10	Pack	Vellum Board Paper, 220gsm, 10pcs/pack			h	
		-	*** Nothing Follows*** PAGE 2 OF 2				
			TOTAL APPROVED BUDGET FOR THE CONTRACT: Two Hundred Seventy-Eight Thousand Eight Hundred Fifteen Pesos and Ninety-Six Centavos Only (Php 278,815.96)				
					e specify brand el/origin .		
PURPO: PR No.:			upplies and Materials for the use of all Division in DSWD FO MIMAROPA for -1027 SHOPPING B	the 4th Quarter of	of 2024		VAT Non-VAT

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(Signature over Printed name) Supplier