



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

REQUEST FOR QUOTATION

RFQ No. 2026-03-0250

Date: March 30, 2026

Company Name : _____
Company Address : _____
Contact Person : _____
Contact No. : _____
Email Address : _____
Company TIN : _____
PhilGEPS Reg. No. (Required) : _____

VAT

NON VAT

Sir/Madam:

The Department of Social Welfare and Development Field Office MIMAROPA will undertake a Mode of Procurement in accordance with **Section 34 -Small Value Procurement of RA12009**. 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.

| | |
|--|--|
| Name of Project | : Supply and Delivery of Laser Printer and Wi-fi Duplex All in One Ink Tank Printer to Support Printing of Important Documents of SOCPEN on SWADT office of Romblon, Occidental Mindoro and Marinduque |
| Approved Budget for the Contract (ABC) | : One Hundred Thirty Five Thousand Pesos Only (Php 135,000.00) |

Award of contract shall be made to the bidder with the lowest quotation for the subject goods which comply with the minimum technical specifications and other terms and conditions stated herein. All bids higher than the **Approved Budget for the Contract (ABC) shall automatically be disqualified**.

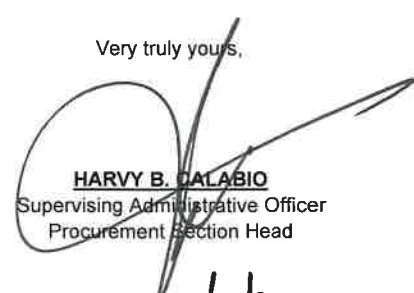
Please accomplish and submit this form together with Annex A and B to DSWD MIMAROPA Region - BAC Secretariat at 2nd Floor 1680 F.T. Benitez corner Malvar Sts., Malate, Manila or email to: procurement.fomimaropa@dswd.gov.ph not later than **1:00 PM of 06 April, 2026 (Monday)**. Quotations submitted to the 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]**.

Interested supplier/service provider is required to submit the following documents:

1. *Platinum PHILGEPS Registration only with valid and current annexes;*
2. *For RED membership:*
 - a. *Current Mayor's/ Business Permit*
 - b. *PHILGEPS Registration Number*
 - c. *Latest Income and Business Tax Return (For ABC above 500K)*
 - d. *SEC Registration/DTI Certificate*
3. *BIR Form 2303 (Certificate of Registration)*
4. *The Notarized Omnibus Sworn Statement*

The Head of the Procuring Entity (HoPE) of the DSWD Field Office MIMAROPA reserves the right to reject any and all quotations, declare a failure of procurement, or not award the contract at any time prior to contract award in accordance with Section 70 the IRR of RA No. 12009, without thereby incurring any liability to the affected bidder or bidders.

Very truly yours,


HARVY B. DALABIO
Supervising Administrative Officer
Procurement Section Head

Received by: _____

(Signature over Printed Name)

Date: _____

3/30/26



TERMS AND CONDITIONS:

1. Award shall be made on per: Item Basis Total Quoted Price Lot Basis
2. Price Validity shall be valid until: One Hundred Twenty (120) Calendar days
3. Services shall be delivered on: 30 Calendar Days upon Receipt the Approved Purchased Order
4. Place of Delivery: DSWD Mimaropa, 1680 Benitez St., cor., 1004 Gen. Malvar St., Malate, Manila, Metro Manila
5. Payment shall be processed after delivery and upon submission of the required supporting documents in accordance with the existing government accounting rules and regulations. Please take note that the corresponding bank transfer fee (if non Land Bank of the Philippines account) shall be charged to the supplier's/contractor's account.
6. Payment through LDDAP-ADA (List of Due and Demandable Accounts Payable- Advice to Debit Account)
Account Name: _____ **Account Number:** _____
(should be the exact account name as registered in the bank)
Bank Name: _____ **Branch:** _____
7. 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.
8. For goods please indicate brand, model, country of origin and warranty
9. In case of discrepancy between unit cost and total cost, unit cost shall prevail. In case of total figures and words, the latter shall prevail.
10. Bidders shall provide correct and accurate information required in the form. Any interlineations, erasures, or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
11. The item/s shall be delivered according to the requirements specified in the Technical Specifications/ Scope of Work/Terms of References. The DSWD shall have the right to inspect and /or to test the goods/services to confirm their conformity to the Technical Specifications/Scope of Work/Terms of Reference.
12. The Procuring Entity may cancel or terminate the contract at any time in accordance with the grounds provided under RA No. 12009 and its implementing rules and regulations (IRR)

After having carefully read and accepted the Instructions and Terms and Conditions , I/We submit our quotation for the

Conforme:

Signature Over Printed Name : _____

Position/Designation : _____

Name of Company : _____

Contact Number : _____

Email Address : _____

IMPORTANT NOTICE:

Any solicitations in any form and for any purpose using the name or acting for and on behalf of DSWD Field Office MIMAROPA is unauthorized, unlawful, and should be disregarded. We strongly urge everyone to exercise caution and not engage with anyone claiming to represent DSWD Field Office MIMAROPA in such a manner.

*To avoid misrepresentation, **please only contact our authorized personnel via email or phone.** You may reach us through:*

Bids and Awards Committee Secretariat

DSWD Field Office MIMAROPA

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

Trunk Line Number: (02) 5328-5111 to 5115 local 24052

Email Address: procurement.fomimaropa@dswd.gov.ph

Website: <http://www.fo4b.dswd.gov.ph>

Procurement Officer-in-Charge :


Anndrey Dianne L. Dimailig
9288144133

Contact Number :



**DSWD FIELD OFFICE MIMAROPA
PRICE QUOTATION FORM**

Annex B

DATE : _____

RFQ NO: 2026-03-0250

COMPANY NAME : _____

| 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." Please indicate the BRAND being offered if applicable | Unit Cost | Total Cost |
|---------------------------------------|------|------|--|--|-----------|------------|
| | | | Supply and Delivery of Laser Printer and Wi-fi Duplex All in One Ink Tank Printer to Support Printing of Important Documents of SOCPEN on SWADT office of Romblon, Occidental Mindoro and Marinduque | | | |
| 1 | 3 | unit | Wifi Duplex All In One Ink Tank Printer | | | |
| | | | Function: Print, Scan Copy with ADF | | | |
| | | | Print Technology: Inkjet | | | |
| | | | Print Speed: ≥ 15 ipm (black) and ≥ 8 ipm (color), ISO Standard | | | |
| | | | Print Resolution: ≥ 1,200 x 6,000 dpi. | | | |
| | | | Duplex Printing: Automatic duplex printing | | | |
| | | | Scan Type: Flatbed and Automatic Document Feeder (ADF) | | | |
| | | | ADF Capacity: ≥ 20 sheets Feeder (ADF) | | | |
| | | | Copy Speed: ≥ 11 ipm (black) and ≥ 4 ipm (color) | | | |
| | | | Connectivity: USB, WiFi, and Ethernet | | | |
| | | | Paper Size Supported: A4, Letter, Legal | | | |
| | | | Paper Input Capacity: ≥ 100 sheets | | | |
| | | | Ink System: Refillable ink tank system | | | |
| | | | Operating System Compatibility: Windows and macOS | | | |
| | | | Duty Cycle: Suitable for office use | | | |
| | | | Warranty: Minimum of one (1) year warranty | | | |
| 2 | 3 | unit | Laser Printer (Monochrome) | | | |
| | | | Output Type: Monochrome | | | |
| | | | Printing Technology: Laser | | | |
| | | | Connectivity: USB 2.0, Ethernet | | | |
| | | | Networking Type: Ethernet | | | |
| | | | Print Speed: ≥ 18 ppm | | | |
| | | | Monthly Duty Cycle: ≥ 5,000 pages | | | |
| | | | Print Resolution (Black): ≥ 600 dpi | | | |
| | | | Maximum Media Size: Legal | | | |
| | | | Warranty: 1 year hardware warranty | | | |
| | | | ***NOTHING FOLLOWS*** | | | |
| | | | TOTAL APPROVED BUDGET FOR THE CONTRACT: | | | |
| | | | One Hundred Thirty Five Thousand Pesos Only (Php 135,000.00) | | | |
| TOTAL AMOUNT OF QUOTATION IN FIGURES: | | | | | | |
| TOTAL AMOUNT OF QUOTATION IN WORDS : | | | | | | |

Submitted by: _____
 Signature Over Printed Name

 Position/Designation

Omnibus Sworn Statement Form

[Note: The duly accomplished form shall be submitted with the Bid]

REPUBLIC OF THE PHILIPPINES)
CITY/MUNICIPALITY OF _____) S.S.

OMNIBUS SWORN STATEMENT

I, _____ of legal age, [Civil Status] _____, [Nationality] _____, and with residence at [Address of Affiant], after having been duly sworn in accordance with law, do hereby depose and state that:

- 1) I am the sole proprietor or authorized representative of _____ with office address at _____;
- 2) As the owner and sole proprietor or authorized representative of _____ I have full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for _____ of the DSWD Field Office MIMAROPA "as supported by the attached duly notarized Special Power of Attorney" for authorized representative];
- 3) _____ [Name of Bidder] is not "blacklisted" or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board; by itself or by relation, membership, association, affiliation, or controlling interest with another blacklisted person or entity;
- 4) Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;
- 5) _____ [Name of Bidder] is authorizing the Head of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;
- 6) *Select one, delete the others:*
 - *If sole proprietorship* : The _____ [Name of Bidder] and its spouse are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;
 - *If partnership* : The partnership itself and the partners of The _____ [Name of Bidder] are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;

- *If cooperative:* The cooperative itself and members of the board of directors, general manager, or chief executive officer of The _____ [Name of Bidder] are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;
 - *If corporation, or joint venture:* The corporation or joint venture itself, and officers, directors, and controlling stockholders of The _____ [Name of Bidder] are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;
 - *If individual consultant not registered under a sole proprietorship, in case of Consulting Services:* The individual consultant and its spouse are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;
- 7) It is understood that failure to faithfully disclose its relationship with the HoPE, members of the BAC, the TWG, and the BAC Secretariat, the head of the PMO or the end-user unit or implementing unit, and the project consultants of the Procuring Entity, or of the procurement agent by consanguinity or affinity up to the third civil degree, as well as its submission of beneficial ownership information containing false entries shall be subject to blacklisting under Section 100 of the IRR of RA No. 12009, without prejudice to criminal and civil liabilities under applicable laws, including their accessory penalties, if any.

Select one, delete the rest:

- *In case of corporations:* [Name of Bidder] declares its beneficial ownership information consistent with its updated General Information Sheet or Beneficial Ownership Declaration Form or any other document duly submitted to the SEC and has maintained a valid and updated file therein in compliance with Sections 20.2.9.1, 81, and 82 of the IRR of Republic Act (RA) No. 12009.
 - *In case of Foreign Bidders:* [Name of Bidder] submitted an appropriate equivalent document in English issued by the country of the bidder concerned in accordance with Section 20.2.9.2 of the IRR of RA No. 12009.
- 8) _____ [Name of Bidder] complies with existing labor laws and standards; and
- 9) _____ [Name of Bidder] is aware of and has undertaken the following responsibilities as a Bidder:
- a) Carefully examine all of the Bidding Documents;
 - b) Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;
 - c) Made an estimate of the facilities available and needed for the contract to be bid, if any; and
 - d) Inquire or secure Supplemental Bid Bulletin(s) issued for the [Project Title].

- 10) _____ [Name of Bidder] did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.
- 11) In case advance payment was made or given to _____ [Name of Bidder], failure to perform or deliver any of the obligations and undertakings in the contract shall be sufficient grounds to constitute criminal liability under existing laws.

IN WITNESS WHEREOF, I have hereunto set my hand this ___ day of ___, 20__ at _____, Philippines.

Duly authorized to sign the Bid for and behalf of:

_____ [Insert Bidder's Name]

[Affiant's Signature over Printed Name]

[Position/Designation]

[Date]

JURAT

SUBSCRIBED AND SWORN to before me this _____ day of [month] [year] at [place of execution], Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her [insert type of government identification card used], with his/her photograph and signature appearing thereon, with no. _____.

WITNESS MY HAND AND SEAL this ___ day of [month] [year].

NAME OF NOTARY PUBLIC

Notarial Commission No. _____

Notary Public for _____ until _____

Roll of Attorneys No. _____

PTR No. __, [date issued], [place issued]

IBP No. __, [date issued], [place issued]

Doc. No. _____

Page No. _____

Book No. _____

Series of _____.