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## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

IBP Road, Constitution Hills, Quezon City

## REQUEST FOR QUOTATION

	RFQ No.	20-0691 SHOPPING B
	Date:	July 22, 2020
Company Name :  Company Address :  Contact Person :	Departmo BAC SECR	ent of Social Welfare and Developm ETARIAT, PPMD-PROCUREMENT SCRVIC
Contact No. : Philgeps Reg. No.: Company TIN:		JUL 3 0 2020
Sir/Madam:	POSTED	by: Cheisea
Please quote your government price/s including delivery the goods listed in <b>Annex A</b> . Failure to indicate informa brochures, catalogues, literatures and/or samples, if appl	UON COUID DE DASIS for non - co	ole taxes, and other incidental expenses for ompliance. Also, furnish us with descriptive
If you are the exclusive manufacturer, distributor or ager quotation a duly notarized certification to this effect.	nt in the Philippines for the goo	ds listed in <b>Annex A</b> please attach in your
As a condition for award, you will be required to su notice. The updated Certification Platinum Members PhilGEPS Registration Number	bmit your Mayor's/Business ship may be submitted in lie	Permit, within 24 hours from receipt of ou of the Mayor's/Business Permit and
Please accomplish and submit this form together with Annex A and all the required documents to DSWD -BAC Secretariat at Ground floor, DSWD-CO Building, IBP Road, Constitution Hills, Quezon City or fax it through number 951-7116 or email to quotations@dswd.gov.ph not later than 3:00 P.M of August Quotations submitted to different fax number(s) or email address(es) as stated above shall not be considered for evaluation.		
indifiber(s) or email address(es) as stated above s	nall not be considered for	evaluation.
	Ve	ery truly yours,
	/, w	ILLIAM V. SARCIA JR.
		Officer-in-Charge, PMS
Terms and Conditions:	Procurement	planning & Management Division
and conditions.		
Lut Dasis		
2. Quotation validity shall not be less than 3. Good/s shall be delivered within 4. Place of Palines and Palines a		
4. Place of Delivery: DSWD-PS Warehouse, DSWI	O Central Office, IBP Road, Ba	stasan Hills Ouezon City
5. Terms of Payment: within 15-30 days upon complete submission of supporting documents		
Payment through LDDAP-ADA (List of Due and Demandable Accounts Payable-Advise to Debit Account).  Account Name:		
BankName :	Account Numb	er:
	Branch :	
*Note: Non Land Bank of the Philippines accounts shall be charged a service fee.  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 person (0.004). (1)		
amount of liquidated damages tracked to		
percent to lot of the amount of the contract, the Procuring Entity may rescind or terminate the annual to		
prefedice 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.		
Please indicate Warranty:	st, unit cost shall prevail.	
10. In case of a fie, the contract shall be awarded to the supplier or service provider who first submitted its quotation.		
11. 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 and register for free."		
2	<u> </u>	
RENEE LYNNE G. MARCA		
Procurement Officer	(Signature	over Printed Name)
Tel. Nos. 931-6139/931-8101 to 07 local 122/124		Supplier

Procurement Form No. 04-A (Annex A)

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RFQ No. 20-0691 SHOPPING B

July 22, 2020

Company Name : Company Address : Contact Person : Philgeps Reg. No: Contact No.: TIN No.

Total Cost Unit Cost Bidder's Specifications
(Please Indicate the detailed specifications of the product/services being offered in the space provided below) Folder, data with lock, finger ring, & clear plastic pocket for labels, 3"  $\times$  9"  $\times$  5" Approved Budget for the Contract: Php 153,875.00 Purchaser's Specifications \*\*\*Nothing follows\*\*\* Clip, backfold, all metal, 32mm, 12pcs/box Clip, backfold, all metal, 19mm, 12pcs/box Clip, backfold, all metal, 25mm, 12pcs/box Clip, backfold, all metal, 50mm, 12pcs/box Indicator tag, with text, "Please sign", 50s Indicator tag, plain, assorted color, 50s ID Jacket with string, 3x4 pack Shit pcs pox ŏq ŏq pox pack pcs ģ 300 200 250 200 1,005 250 400 260 No E

PURPOSE: PSAMD Stockpile

2020-06-00093 PR No.

IMPORTANT: The winning bidder MUST pick-up duplicate copy and SIGN the original copy of Purchase Order (P.O.) at DSWD-Central Office, Procurement and Supply Division within three (3) days from the date advance copy was served to thru fax. FAILURE to show up and sign the original P.O. means that the bidder is not interested and will be a ground for suspension/blacklisting in DSWD's future

Tel no. 951-7116 / Fax No. 931-6139 RENEECHINE G. MARCA Procurement Officer

(Signature over printed name)