${\bf DEPARTMENT\ OF\ SOCIAL\ WELFARE\ AND\ DEVELOPMENT}$

Annex A

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."				RFQ No. Date:	23-03-0396-NP-SVP 16-Mar-23	
Compa	ny Name:					
Compa	ny Address:			=		
Contact	t Person:			-		
Contact				-		
	PS Reg. No.:			-		
	_		-	-		
Compa	ny TIN:			-		
Item No.	Qty.	Unit	Purchaser's Specifications	Bidder's Specifications (Please fill out the detailed specifications in	Unit Cost	Total Cost
				the space provided)		
	237,857	set	1. Family Risk and Vulnerability Form (FRVA) *70 gsm A4 size (book paper) with delivery to DSWD 4ps RPMO,CDO *FRVA is composed of 7 pages but only 4 sheets will be used since printing is back to back - with sorting			
			*****NOTHING FOLLOWS*****			
			Approved Budget for the Contract			
			(ABC): PhP 998,999.40			
FAILUF	TANT: The w	2023-03-0396 inning bidder M original P.O me	n of 2023 4ps FRVA MUST SIGN the original copy of Purchase Order (P.O) cans that the bidder for suspension or blacklisting in DSWD's future biddir			
				Supplier		
ARNEL V. RADAZA Procurement Officer				Signature over Printed Name		

Company Name:	RFQ N	o.: 23-03-0396-NP-SVP
Company Address:	Da	te: 16-Mar-23
Contact Person:		
Contact No. :		
Philgeps Reg. No.:		
Company TIN:		
Sir/Madam:		
Please quote your government price/s including delivery charges, VAT or of A . Failure to indicate information could be basis for non – compliance. Also applicable.	**	•
If you are the exclusive manufacturer, distributor or agent in the Philippines certification to this effect.	for the goods listed in Annex A please attach	in your quotation a duly notarized
As a condition for award, you will be required to submit the following of	locumentary requirements:	
* Accomplished Quotation (for goods or infra)/Proposal (for co	nsulting)	
* Mayor's Permit	* Income/Bussines Tax Ret amounting above Php. 500l	urns for Contract with an ABC
	*Notarized Omnibus Sworn	n Statement for contracts with an
* PhilGEPS Registration No.	ABC amounting to above P	hp. 50,000.00
* PCAB license (for infra)	1 1: :	' I DI 'I CEDC D. M
Note:Submission of PhilGEPS Platinum Certificate of Registration and Men	nbership is acceptable in lieu of the Mayor's P	ermit and PhilGEPS Reg. No.
Please accomplish and submit this form together with Annex A and all the re Masterson Avenue, Upper Carmen, Cagayan de Oro City or email it to procument. Quotations submitted to different email address as	arement.dswd.fo10@gmail.com not later than	of
		Very Truly Yours,
		ARNEL V. RADAZA
		DSWD 10 Procurement Officer
Terms and Conditions:		
1. Award shall be made on per: Item Basis	✓ Total Quoted Price	Lot Basis
2. Quotation validity shall be 6 Months		
3. Goods/Services shall be delivered/conducted within	15-30 working days upon rec	eipt of PO
4. Place of Delivery DSWD Field Office 10		
5. Terms of Payment: 15-30 days after the inspections	(D 11 411 (D1) 4	
Payment through LDDAP-ADA (List of Due and Demandable Accoun		L
Account Name: Bank Name	Account Num	
*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 with		ha liawidatad damaaaa ahall ha at
least equal to one-tenth of one percent (0.001) of the cost of the unperform	1 0	•
damages reaches ten (10%) of the amount of the contract, the Procuring 1		
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 prev	ail.	
9. Please indicate Warranty		
10. In case of a tie, the contract shall be awarded to the supplier or service pr 11. NOTE: "Prospective supplier must be registered at the Philippine Government at www.philgeps.gov.ph and register for free."	-	EPS). You may visit the PhilGEPS
ARNEL V. RADAZA		
Procurement Officer	Signature	over Printed Name

Republic of the Philippines

Department of Social Welfare and Development

Field Office No. 10 Cagayan de Oro City

PROOF OF RECEIPT

Quotation No:

23-03-0396-NP-SVP
1. Family Risk and Vulnerability Form (FRVA)
*70 gsm A4 size (book paper) with delivery to DSWD 4ps RPMO,CDO
*FRVA is composed of 7 pages but only 4 sheets will be used since printing is back to back - with sorting Items:

Administration of 2023 4ps FRVA Purpose:

Company Name	Representative	Position / Designation	Date	Signature

Canvasser	 -