## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Annex A

			red at the Philippine Government Electronic Procurement PS website at www.philgeps.gov.ph and register for free."	RFQ No. Date:	23- 0525 -NP-SVP 30-Mar-23	
Compan	y Name:			_		
Compan	y Address:			_		
Contact Person:						
Contact No.:			_			
PhilGEPS Reg. No.:				-		
Compan	y TIN:			-		
	•			<del>-</del>		
Item No.	Qty.	Unit	Purchaser's Specifications	Bidder's Specifications (Please fill out the detailed specifications in the space provided)	Unit Cost	Total Cost
	14	Unit	PRINTER			
			COPY, PRINT, SCAN			
			PLEASE SEE ATTACHED TERMS			
			OF REFERENCE			
			*******NOTHING FOLLOWS*****			
			Approved Budget for the Contract			
			(ABC): PhP 209,986.00			
PURPOS	E:	PSD-CIS-AIC	S - CIS-AICS	_		
FAILURE	to sign the o	riginal P.O m	25 AUST SIGN the original copy of Purchase Order (P.O) eans that the bidder and for suspension or blacklisting in DSWD's future b			
ARNEL	V. RADAZA			Supplier		
	ement Office	r		Signature over Printed Name		

Company Name: Company Address: Contact Person: Contact No.: Philgeps Reg. No.: Company TIN:	RFQ No.: Date:	23- 0525 -NP-SVP 30-Mar-23
Sir/Madam:		
Please quote your government price/s including delivery charges, VAT or o <b>Annex A</b> . Failure to indicate information could be basis for non – compliance samples, if applicable.		<del>-</del>
If you are the exclusive manufacturer, distributor or agent in the Philippine notarized certification to this effect.	s for the goods listed in <b>Annex A</b> please attack	h in your quotation a duly
As a condition for award, you will be required to submit the following doc	umentary requirements:	
* Accomplished Quotation (for goods or infra)/Proposal (for consu	* Income/Bussines Tax Returns for	or Contract with an ABC
* Mayor's Permit	amounting above Php. 500k *Notarized Omnibus Sworn State	ement for contracts with an
* PhilGEPS Registration No.	ABC amounting to above Php. 50	
* PCAB license (for infra)  Note:Submission of PhilGEPS Platinum Certificate of Registration and Mem	bershin is accentable in lieu of the Mayor's Pe	ermit and PhilGEPS Reg. No.
	,	
Please accomplish and submit this form together with Annex A and all the r Masterson Avenue, Upper Carmen, Cagayan de Oro City or email it to proce Quotations submitted to different email address	urement.dswd.fo10@gmail.com not later than	n of
		Very Truly Yours,
		ARNEL V. RADAZA
		DSWD 10 Procurement Officer
Terms and Conditions:		
<ol> <li>Award shall be made on per:</li> <li>Quotation validity shall be</li> <li>6 Months</li> </ol>	Total Quoted Price	Lot Basis
3. Goods/Services shall be delivered/conducted within	15-30 working days upon receipt	of PO
4. Place of Delivery DSWD Field Office 10 5. Terms of Payment: 15-30 days after the inspections		
Payment through LDDAP-ADA (List of Due and Demandable Accounts Pa	yable-Advice to Debit Account).	
Account Name:	Account Number:	
Bank Name		
*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 be at least equal to one-tenth of one percent (0.001) of the cost of the unpliquidated damages reaches ten (10%) of the amount of the contract, the to other courses of action and remedies available under the circumstances.	nin the time specified above, the amount of to performed portion for every day of delay. Onc Procuring Entity may rescind or terminate the	e the cumulative amount of
<ul><li>7. For goods, please indicate brand, model and country of origin.</li><li>8. In case of discrepancy between unit cost and total cost, unit cost shall pr</li><li>9. Please indicate Warranty</li></ul>	evail.	
10. In case of a tie, the contract shall be awarded to the supplier or service website at <a href="https://www.philgeps.gov.ph">www.philgeps.gov.ph</a> and register for free."	provider who first submitted its quotation.	
ARNEL V. RADAZA Procurement Officer		

## Republic of the Philippines

## **Department of Social Welfare and Development**

Field Office No. 10 Cagayan de Oro City

## **PROOF OF RECEIPT**

Quotation No: 23- 0525 -NP-SVP

Items: PRINTER

Purpose: PSD-CIS-AICS - CIS-AICS

Company Name	Representative	Position / Designation	Date	Signature

Canvasser	