DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

			registered at the Philippine Government Electronic Procure GEPS website at www.philgeps.gov.ph and register for fre		RFQ No.: Date:	24-0291-NP-SVP 18 Mar 2024
Compa Contac Contac PhilGE Compa	ny Name: ny Addres t Person: t No.: PS Reg. No ny TIN: Address:			- - - -		
Item No.	Qty.	Unit	Purchaser's Specifications	Bidder's Specifications (Please fill out the detailed specifications in the space provided)	Unit Cost	Total Cost
			SUPPLY AND DELIVERY OF:			
	33	PAX	1ST DAY: 1 MEAL AND 2 SNACKS (2 QUARTERS)			
	45	PAX	2ND DAY: 1 MEAL AND 2 SNACKS (2 QUARTERS)			
	31	PAX	2ND DAY: 1PM SNACK (2 QUARTERS)			
			FOOD:			
			*Buffet Service			
			*3 Viands with rice, drinks and dessert			
			*1 set of snacks with drinks (AM & PM Snacks)			
			Date of Activity: February and August CY 2024			
			*******NOTHING FOLLOWS****			
			Approved Budget for the Contract			
			(ABC): PhP 84,200.00			
PURPO	SE:	FMD - 1st a	nd 3rd Quarter Financial Management Division's Staff Me	eting		
PR No.		2024-03-029		<u></u>		
means th	nat the bidde	r is not inter	dder MUST SIGN the original copy of Purchase Orde ested and will be a ground for suspension or blacklis			n the original P.O
	NEL V. RA				Supplier over Printed Name	2

Company Name:			_	RFQ No.	24-0291-NP-SVP	
Company Address:			_	Date:	18-Mar-24	
Contact Person: Contact No. :	-		_			
Philgeps Reg. No. :			_			
Company TIN:	-		_			
Email Address:			_			
Eman Address:			_			
Sir/Madam:						
			licable taxes, and other incidenta , furnish us with descriptive broc			
If you are the exclusive manufacertification to this effect.	acturer, distributor or ag	ent in the Philippines for the	goods listed in Annex A please a	ttach in your quot	ation a duly notarized	
As a condition for award, you	u will be required to su	bmit the following docume	ntary requirements:			
* Accomplished Quo	otation (for goods or in	fra)/Proposal (for consulting	g)			
1	, 8	, 1	* Income/Bussines Tax Return	rns for Contract	with an ABC	
* Mayor's Permit			amounting above Php. 500k *Notarized Omnibus Sworn Statement for contracts with an amounting to above Php. 50,000.00			
* PhilGEPS Registra	ation No.					
* PCAB license (for	infra)					
Note: Submission of PhilGEPS	Platinum Certificate of	Registration and Membershir	is acceptable in lieu of the Mayo	or's Permit and Ph	ilGFPS Reg. No.	
			-		_	
	men, Cagayan de Oro C	ity or email it to bac.fo10@d	documents to DSWD – Procurem swd.gov.ph not later than 5:00 P uation.			
				Very T	ruly Yours,	
					V. RADAZA ocurement 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	15-30 working days u	man receipt of PO				
delivered/conducted within	15-50 WOLKING days t	ipon receipt of FO				
4. Place of Delivery	<u>Venue</u>					
5. Terms of Payment:	15-30 days after the i	nspections				
Payment through LDDAP-ADA	(List of Due and Demand	dable Accounts Payable-Advic	e to Debit Account).			
Account Nan			Account Number:			
Bank Nar						
*Note: Non Land Bank of the	Philippines accounts sha	ll be charged a service fee.				
one-tenth of one percent (0.001) of the amount of the contract, the	of the cost of the unperfor	med portion for every day of de	rified above, the amount of the liqui lay. Once the cumulative amount o without prejudice to other courses	f liquidated damag	es reaches ten (10%)	
the circumstances.	d model and country of or	ioin				
7. For goods, please indicate brane 8. In case of discrepancy between	•	-				
9. Please indicate Warranty	unit cost and total cost, un	nt cost shari prevan.				
10. In case of a tie, the contract sh	all be awarded to the supp	lier or service provider who first	submitted its quotation.			
	must be registered at the Pl	_	Procurement System (PhilGEPS). Y	ou may visit the Pl	nilGEPS website at	
ARNEL V. RADAZA						
Procurement Officer				Supplier		
			Signature	over Printed Nam	ne	

Republic of the Philippines

Department of Social Welfare and Development

Field Office No. 10 Cagayan de Oro City

PROOF OF RECEIPT

Quotation No: 24-0291-NP-SVP

Items: 1ST DAY: 1 MEAL AND 2 SNACKS (2 QUARTERS)

Purpose: FMD - 1st and 3rd Quarter Financial Management Division's Staff Meeting

Company Name	Representative	Position / Designation	Date	Signature

Canvasser	