RFQ No.: 24-0609-NP-SVP

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

		_	registered at the Philippine Government Electronic Procure GEPS website at www.philgeps.gov.ph and register for free	-	RFQ No.: Date:	24-0609-NP-SVP 2 May 2024
Compa	ny Name:			_		
Compa	ny Addres	ss:		_		
Contac	t Person:			_		
Contac	t No.:			<u>-</u>		
PhilGE	PS Reg. N	io.:		<u>-</u>		
Compa	ny TIN:			-		
Email A	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:			
	10	PAX	1 MEAL AND 2 SNACKS @12 MEETINGS			
			FOOD: LUNCH rice, 3 VIANDS, DESSERTS, DRINKS SNACKS: AM & PM SNACKS (JUICE IN CAN W SANDWICH)			
			*******NOTHING FOLLOWS****			
			Approved Budget for the Contract			
			(ABC): PhP 60,000.00			
PURPO PR No.	SE:	ORD/SOCT 2024-04-060	ECH/OPLAN PAG ABOT - Conduct of Meetings and Par	tnership Forum with SWADs (OP)	LAN PAG-ABOT)	
means th	nat the bidde	er 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
ARNEL V. RADAZA Procurement Officer				Supplier Signature over Printed Name		e

Company Address			_	RFQ No. 24-0609-NP-SVI	
Company Address:				Date: 02-May-24	
Contact Person: Contact No. :			_		
Philgeps Reg. No. :	-				
Company TIN:			_		
Email Address:					
Eman Address.			_		
Sir/Madam:					
				al expenses for the goods listed in thures, catalogues, literatures and/or	
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	attach in your quotation a duly notariz	
As a condition for award, you	u will be required to su	bmit the following documer	tary requirements:		
* Accomplished Quo	tation (for goods or in	fra)/Proposal (for consulting	g)		
				rns for Contract with an ABC	
* Mayor's Permit			amounting above Php. 500k *Notarized Omnibus Sworn Statement for contracts with a		
* PhilGEPS Registra	ntion No.		amounting to above Php. 50,		
* PCAB license (for	infra)				
Note:Submission of PhilGEPS	Platinum Certificate of	Registration and Membershir	is acceptable in lieu of the May	or's Permit and PhilGEPS Reg. No.	
	men, Cagayan de Oro C	ity or email it to bac.fo10@d	swd.gov.ph not later than 5:00 P	nent Unit, DSWD Field Office 10, PM on May 6, 2024. Quotations	
				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	15-30 working days u	inon receipt of PO			
delivered/conducted within		ipon receipt of ro			
4. Place of Delivery	<u>Venue</u>				
5. Terms of Payment:	15-30 days after the i	<u>inspections</u>			
Payment through LDDAP-ADA		•			
Account Nan Bank Nar			Account Number:		
*Note: Non Land Bank of the		all be charged a service fee.			
			::: I = I = I = I = I = I = I = I = I =	: 1 - 4 - 1 1 1 - 11 1 4 1 4	
one-tenth of one percent (0.001)	of the cost of the unperfor	med portion for every day of de	lay. Once the cumulative amount o	idated damages shall be at least equal i f liquidated damages reaches ten (10% of action and remedies available unde	
7. For goods, please indicate brands. In case of discrepancy between	•	•			
Please indicate Warranty		r · · · · ·			
10. In case of a tie, the contract sh	all be awarded to the supp	lier or service provider who first	submitted its quotation.		
11. NOTE: "Prospective supplier www.philgeps.gov.ph and register	•	hilippine Government Electronic	Procurement System (PhilGEPS). Y	You may visit the PhilGEPS website at	
ARNEL V. RADAZA			-		
Procurement Officer				Supplier	
				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: 24-0609-NP-SVP

Items: 1 MEAL AND 2 SNACKS @12 MEETINGS

Purpose: ORD/SOCTECH/OPLAN PAG ABOT - Conduct of Meetings and Partnership Forum with SWADs (OPLAN PAG-ABOT)

Company Name	Representative	Position / Designation	Date	Signature

Canvasser	