DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

ompany Name ompany Addr ontact Person ontact No.: hilGEPS Reg. ompany TIN: mail Address: [tem No. Qty.	ess:	Purchaser's Specifications	Bidder's Specifications (Please fill out the detailed		
ontact Person ontact No.: hilGEPS Reg. ompany TIN: mail Address: [tem No. Qty.	No.:		(Please fill out the detailed		
ontact No.: hilGEPS Reg. ompany TIN: mail Address: Item No. Qty.	No.:		(Please fill out the detailed		
hilGEPS Reg. ompany TIN: mail Address: Item No. Qty.	<u> </u>		(Please fill out the detailed		
ompany TIN: mail Address: Item No. Qty.	<u> </u>		(Please fill out the detailed		
mail Address: Item No. Qty.	Unit		(Please fill out the detailed		
Item No. Qty.	Unit		(Please fill out the detailed		
No. Qty.	Unit		(Please fill out the detailed		
15			specifications in the space provided)	Unit Cost	Total Cost
15		SUPPLY AND DELIVERY OF:	•		
15		OFFICE TABLE			
15	1	Dimension: W110 x D50 x H79 cm			
15		Material:			
	UNIT	*Particle Board w/ Melamine panel			
		*Metal Tube legs			
		*With drawer			
		*color: Walnut & Oak			
		*******NOTHING FOLLOWS****			
					-
		Approved Budget for the Contract			
		(ABC): PhP 225,000.00			
URPOSE:	DGD /GED ~	ED OFFICE USE	<u>'</u>		
R No.	PSD/SFP- S 2024-09-109	FP OFFICE USE 90			
		dder MUST SIGN the original copy of Purchase Orested and will be a ground for suspension or blackli		FAILURE to sign	the original P.O
ARNEL V.	RADAZA				

Signature over Printed Name

Company Name:			RFQ No. 24-1090-NP-SVP		
Company Address:			Date: 03-Sep-24		
Contact Person:			_		
Contact No. :			_		
Philgeps Reg. No. : Company TIN:			_		
			-		
Email Address:	-		_		
Sir/Madam:					
			icable taxes, and other incidental expenses for the goods listed in us with descriptive brochures, catalogues, literatures and/or sample		
If you are the exclusive manufacter tification to this effect.	cturer, distributor or age	nt in the Philippines for the go	oods listed in Annex A please attach in your quotation a duly not	rized	
As a condition for award, you	will be required to sub	omit the following documen	ary requirements:		
* Accomplished Quot	tation (for goods or infr	a)/Proposal (for consulting)			
* Mayor's Permit			* Income/Bussines Tax Returns for Contract with an ABC amounting above Php. 500k		
* PhilGEPS Registrat	tion No		*Notarized Omnibus Sworn Statement for contracts with a	ith an ABC	
* PCAB license (for i			amounting to above Php. 50,000.00		
Note:Submission of PhilGEPS	Platinum Certificate of R	Registration and Membership	is acceptable in lieu of the Mayor's Permit and PhilGEPS Reg. No).	
Masterson Avenue, Upper Carn	nen, Cagayan de Oro Cit	y or email it to bac <u>.fo10@ds</u>	ocuments to DSWD – Procurement Unit, DSWD Field Office 10, wd.gov.ph not later than 5:00 PM on September 9, 2024. Quota		
submitted to different email add	lress as stated above shal	I not be considered for evalua	tion.		
			Very Truly Yours,		
			ARNEL V. RADAZA DSWD 10 Procurement Offi	cer	
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 receipt of PO				
4. Place of Delivery	DSWD Field Office 10)			
5. Terms of Payment:	15-30 days after the in	_			
Payment through LDDAP-ADA (to Debit Account).		
Account Name			Account Number:		
Bank Nam	ne:				
*Note: Non Land Bank of the	Philippines accounts shall	be charged a service fee.			
one-tenth of one percent (0.001) o the amount of the contract, the Pr	f the cost of the unperform	ned portion for every day of del	fied above, the amount of the liquidated damages shall be at least equ ay. Once the cumulative amount of liquidated damages reaches ten (1 hout prejudice to other courses of action and remedies available unde	0%) of	
<i>circumstances.</i> 7. For goods, please indicate brand	model and country of orig	rin.			
8. In case of discrepancy between t					
9. Please indicate Warranty	and cost and total cost, and	reast simil prevail.			
10. In case of a tie, the contract sha	all be awarded to the suppli	er or service provider who first	submitted its quotation.		
11. NOTE: "Prospective supplier n www.philgeps.gov.ph and register	•	ilippine Government Electronic	Procurement System (PhilGEPS). You may visit the PhilGEPS website	at	
ARNEL V. RADAZA					
Procurement Officer			Supplier 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: 24-1090-NP-SVP **Items:** OFFICE TABLE

Purpose: PSD/SFP- SFP OFFICE USE

Company Name	Representative	Position / Designation	Date	Signature

Canvasser	