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:	•		
Compan	y Name:			_			
Compan	y Address:			_			
Contact	Person:			_			
Contact	No.:						
PhilGEP	S Reg. No.:						
Compan	y TIN:			-			
				-			
Item No.	Qty.	Unit	Purchaser's Specifications	Bidder's Specifications (Please fill out the detailed specifications in the space provided)	Unit Cost	Total Cost	
			DSWD FIELD OFFICE 10 TO VENUE,				
	3	VAN	VENUE TO DSWD FILED OFFICE 10				
			********NOTHING FOLLOWS*****				
			Approved Budget for the Contract				
			(ABC): PhP 58,500.00				
PURPOSE: PDP-PDPS - FOR THE CONDUCT OF POLICY AND PLANS DIVISION FMPLOYEE PRODUCTIVITY TRAINING CUM MID YEAR PREW PR No. 2023-04-0622 IMPORTANT: The winning bidder MUST SIGN the original copy of Purchase Order (P.O) upon receipt of the P.O. FAILURE to sign the original P.O means that the bidder is not interested and will be a ground for suspension or blacklisting in DSWD's future biddings.							
ARNEL	V. RADAZA			Supplier			
Procurement Officer				Signature over Printed Name			

Company Name:	RFQ No. : 23- 0622 -NP-SVP
Company Address:	Date: 04-Apr-23
Contact Person:	
Contact No.:	
Philgeps Reg. No. :	
Company TIN:	
Sir/Madam:	
	s, VAT or other applicable taxes, and other incidental expenses for the goods listed in compliance. Also, furnish us with descriptive brochures, catalogues, literatures and/or
If you are the exclusive manufacturer, distributor or agent in the notarized certification to this effect.	Philippines for the goods listed in Annex A please attach in your quotation a duly
As a condition for award, you will be required to submit the folk	owing documentary requirements:
* Accomplished Quotation (for goods or infra)/Proposal	I (for consulting)
* Mayor's Permit	* Income/Bussines Tax Returns for Contract with an ABC amounting above Php. 500k
	*Notarized Omnibus Sworn Statement for contracts with an
* PhilGEPS Registration No.	ABC amounting to above Php. 50,000.00
* PCAB license (for infra)	and Membership is acceptable in lieu of the Mayor's Permit and PhilGEPS Reg. No.
-	
Masterson Avenue, Upper Carmen, Cagayan de Oro City or email	nd all the required documents to DSWD – Procurement Unit, DSWD Field Office 10, I it to procurement.dswd.fo10@gmail.com not later than of iil address as stated above shall not be considered for evaluation. Very Truly Yours,
	ARNEL V. RADAZA
Terms and Conditions:	DSWD 10 Procurement Officer
1. Award shall be made on per: ✓ Item Ba	asis Total Quoted Price Lot Basis
Quotation validity shall be 6 Months Goods/Services shall be delivered/conducted within	15-30 working days upon receipt of PO
4. Place of Delivery DSWD Field Office 10	13-30 WORKING days upon receipt of FO
5. Terms of Payment: 15-30 days after the inspection	ons
Payment through LDDAP-ADA (List of Due and Demandable Ad	
Account Name:	Account Number:
Bank Name	
*Note: Non Land Bank of the Philippines accounts shall be charged a	service fee.
6. Liquidated Damages/Penalty: <i>In case of failure to make full de</i>	elivery within the time specified above, the amount of the liquidated damages shall
	of the unperformed portion for every day of delay. Once the cumulative amount of tract, the Procuring Entity may rescind or terminate the contract, without prejudice
to other courses of action and remedies available under the circ	umstances.
7. For goods, please indicate brand, model and country of origin.	
8. In case of discrepancy between unit cost and total cost, unit co	ost shall prevail.
9. Please indicate Warranty	
10. In case of a tie, the contract shall be awarded to the supplier website at www.philgeps.gov.ph and register for free."	or service provider who first submitted its quotation.
ARNEL V. RADAZA Procurement Officer	Signature over Printed Name
1 Total ement officer	Signature over Fillited Natile

Republic of the Philippines **Department of Social Welfare and Development**

Field Office No. 10 Cagayan de Oro City

PROOF OF RECEIPT

23- 0622 -NP-SVP **Quotation No:**

Items:

DSWD FIELD OFFICE 10 TO VENUE, VENUE TO DSWD FILED OFFICE 10
PPD-PDPS - FOR THE CONDUCT OF POLICY AND PLANS DIVISION EMPLOYEE PRODUCTIVITY TRAINING CUM MID Purpose:

Company Name	Representative	Position / Designation	Date	Signature

 Canvasser	