Procurement Officer

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

			Bistered at the 1 milippine Government Electronic Froctarement System		24-1210-NP-SVP 11 Oct 2024	
Compa Contac Contac PhilGE Compa	ny Name: ny Address 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:			
	178870	Pc	SWDI Forms printing (GIS, SWDI Scoresheet,FRVA 70 GSM, A4 size(bock paper) with delivery to DSWD 4Ps RPMOCDO, SWDI scoresheet of 4 pages but only 2 sheets will be used since printing is back to back with sorting			
	178870	SET	General Intake Sheet, 70 gsm, A4 size, book paper 70 GSM A4 size (book Paper) with delivery to DSWD 4Ps RPMO CDO, GIS is composed of 2 papers but only 1 sheet will be used since printing is back to back with sorting			
			*******NOTHING FOLLOWS****			
			<u> </u>			
			Approved Budget for the Contract			
			(ABC): PhP 425,710.60			
PURPO PR No.	SE:	4PS/4PS- F	OR ADMINISTRATION OF 4PS ASSESSMENT IN POC	<u>) </u>		
means th		r is not inter	dder MUST SIGN the original copy of Purchase Orde rested and will be a ground for suspension or blacklisti		FAILURE to sign	the original P.O

SupplierSignature over Printed Name

Company Name:			RFQ No. 24-1210-NP-SVP	
Company Address:			Date: 11-Oct-24	
Contact Person:			Date, 11-0ct-24	
Contact No. :			-	
Philgeps Reg. No. :			_	
Company TIN:			-	
Email Address:			- -	
Sir/Madam:				
	_		icable taxes, and other incidental expenses for the goods listed in Ann ous with descriptive brochures, catalogues, literatures and/or samples, it	
If you are the exclusive manufa certification to this effect.	cturer, distributor or age	ent in the Philippines for the g	oods listed in Annex A please attach in your quotation a duly notarized	i
As a condition for award, you	ı will be required to su	bmit the following documen	tary requirements:	
* Accomplished Quo	tation (for goods or inf	fra)/Proposal (for consulting		
* Mayor's Permit	* Mayor's Permit		* Income/Bussines Tax Returns for Contract with an ABC amounting above Php. 500k	
* PhilGEPS Registra			*Notarized Omnibus Sworn Statement for contracts with an AB amounting to above Php. 50,000.00	,C
* PCAB license (for i	intra)			
Note:Submission of PhilGEPS	Platinum Certificate of	Registration and Membership	is acceptable in lieu of the Mayor's Permit and PhilGEPS Reg. No.	
	nen, Cagayan de Oro Ci	ity or email it to bac.fo10@ds	ocuments to DSWD – Procurement Unit, DSWD Field Office 10, wd.gov.ph not later than OCTOBER 11, 2024, 05:00 PM. Quotationation.	s
			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 delivered/conducted within	15-30 working days u	ipon receipt of PO		
4. Place of Delivery	DSWD Field Office 1	<u>10</u>		
5. Terms of Payment:	15-30 days after the i	inspections		
Payment through LDDAP-ADA	(List of Due and Demand	dable Accounts Payable-Advice	to Debit Account).	
Account Nam			Account Number:	
Bank Nan *Note: Non Land Bank of the		ll he charged a service fee		
		-	if ad about the amount of the liquidated damages shall be at least equal to	
one-tenth of one percent (0.001) o	of the cost of the unperfor	med portion for every day of de	fied above, the amount of the liquidated damages shall be at least equal to ay. Once the cumulative amount of liquidated damages reaches ten (10%) on thout prejudice to other courses of action and remedies available under the	of.
7. For goods, please indicate brand	l. model and country of ori	igin.		
8. In case of discrepancy between	•	•		
9. Please indicate Warranty				
10. In case of a tie, the contract sh	**	*	•	
11. NOTE: "Prospective supplier i www.philgeps.gov.ph and register		hilippine 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: 24-1210-NP-SVP

SWDI Forms printing (GIS, SWDI Scoresheet,FRVA 70 GSM, A4 size(bock paper) with delivery to DSWD 4Ps RPMOCDO, SWDI

scoresheet of 4 pages but only 2 sheets will be used since printing is back to back with sorting

Purpose: 4PS/4PS- FOR ADMINISTRATION OF 4PS ASSESSMENT IN POOS

Representative	Position / Designation	Date	Signature
	Representative	Representative Position / Designation	Representative Position / Designation Date

Canvasser	