

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office IX, Zamboanga City

HOME FOR THE ELDERLY

REQUEST FOR QUOTATION

RFQ NO.

2020-12-0073

DATE:

COMPANY NAME :

COMPANY ADDRESS :

CONTACT PERSON :

CONTACT NO. :

COMPANY TIN NO :

Sir/Madam:

Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. Failure to indicate information could be basis for non-compliance. Also, furnish us with the descriptive brochures, catalogues, literatures and/or samples, if applicable.

If you are the exclusive manufacturer, distributor or agent in the Philippines for the goods listed in Annex A please attach in your quotation a duly notarized certification to this effect.

Please accomplish and submit this form together with Annex A to DSWD-RO IXZAMB.CITY on or before DEC. 14, 2020 10:00 AM

Very truly yours,

MA. CORAZON G. SUMICAD
CAO

Terms and Conditions:

- 1. Award shall be made on per: [] ITEM [x] LOT
2. Quotation validity shall not be less than 15 days
3. Good/s shall be delivered : 15 DAYS UPON RECEIPT OF PO
4. Place of Delivery: : HOME FOR THE ELDERLY
5. Terms of payment: : 30 CALENDAR DAYS AFTER THE DELIVERY
6. Liquidated Damages/Penalty 1/10 of 1% of undelivered portion x No. of Days Delay.
7. Indicate brand, model and country of origin.:
8. In case of discrepancy between unit cost and total cost, unit cost shall prevail.
9. Warranty:

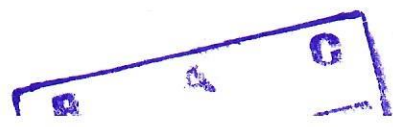
LOT HE-2070-12-0493
POSTED
PHILGEPS REF NO.
SIGNATURE

10. Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PhilGEPS). You may visit Philgeps website at www.philgeps.gov.ph and register for free.

RENATO G. FOJAS 12-10-20
Regional Procurement Officer

(supplier's signature over printed name)

PHILGEPS NO.:
PHILGEPS EXPIRY:



COMPANY NAME: _____ ANNEX A: RFQ
 COMPANY ADDRESS: _____ RFQ NO.: 2020-11-00
 CONTACT PERSON: _____ DATE: _____
 CONTACT NO.: _____

ITEM NO.	QTY.	UNIT	PURCHASER'S SPECIFICATIONS	ABC	BIDDER'S SPECIFICATIONS	UNIT COST	TOTAL COI
	1	LOT	MEDICINES				
	100	BOXES	VITAMIN C + ZINC; 100'S	700.00			
	100	BOXES	MULTIVITAMINS + IRON; 100'S	500.00			
	150	BOXES	VITAMIN B-COMPLEX; 100'S	300.00			

PURPOSE: **FOR THE DAILY INTAKE OF CLIENTS IN THE HOME FOR THE ELDERLY.**
 PR. NO.: **2020-11-0069 / DECEMBER 02, 2020**

IMPORTANT: The winning bidder must sign the Original copy of Purchase Order (P.O.) with in five (5) days from the date of receipt. Failure to sign the original P.O means that th bidder is not interested and will be a ground for suspension or blacklisting in DSWD's future biddings.

[Signature]
RENATO G. FOLAS
 12-10-20
 PROCUREMENT OFFICER

CANVASSER

BSCC-2020-12-2492
POSTED
 DEPS REP 10
 DATE: _____
 AUTHORITY: _____

SUPPLIER'S SIGNATURE OVER PRINTED NAME