



REQUEST FOR QUOTATION

DRN: F01X-CBM-FIN-2022-09-37954-8

RFQ NO.

2022-1019

DATE:

17-Oct-2022

COMPANY NAME COMPANY ADDRESS CONTACT PERSON CONTACT NO. COMPANY TIN

Sir/Madam:

KAMHI-2011-10-597

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 TECHNICAL SPECIFICATIONS 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 submit this form together with Annex A to DSWD FO IX BAC OFFICE on or before 2022 @ 5:00 PM.

Very huly burs

Procurement Officer

10/18/20

Terms and Conditions:

PURPOSE: MEDICAL SUPPLIES.

PR NUMBER: 2022-10-1019

1. Award shall be made on per

__ Item Basis

xx Lot Basis

2. Quotation validity

20 CALENDAR DAYS FROM BID OPENING

3. Delivery Period

25 days after conforme on the P.O.

4. Delivery Area

DSWD FO-9, ZC

5. Terms of payment

WITH IN 60 WORKING DAYS

6. Liquidated Damages/Penalty

1/10 of 1% of undelivered portion x No. of days of delay

7. In case of discrepancy between unit cost and total cost, unit cost shall prevail.

8. Warranty

N/A

9. Performance Security

N/A

 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.

Note:

Mayor's/Business Permit

(signature over printed name)

Supplier

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Flot Office IX
General Vicente Alvance Street, Zamboanga City
Telephone Ivan. (62/62) 95: 40317-7931-82447-991-1001
Email: foligidant garup
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#DSWDMayMalasakit

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT GENERAL VICENTE ALVAREZ ST., ZAMBOANGA CITY EDWIN O. HBIONADA 6554477977

RFQ NO. : 2022-1019 DATE: 10/17/2022

EM NO. QTY.	UNIT	PURCHASER'S SPECIFICATIONS	TOTAL ABC	BIDDER'S SPECIFICATIONS	UNIT COST
150	box	ASCORBIC ACID 1000mg FORTE TABLET 30 TABLET/BOX			ס־
		Total =	57,000.00		
		For Submission with the carryass paper;			
		1. Business Permit			
		2. Philgeps Certification			
					TOTAL = P

PR. NO.

2022-10-1019

RENATO G. FOJAS

SUPPLIER