

**REQUEST FOR QUOTATION**

*Section 53.9b - SVP - Goods*

RFQ NO. 06-0932  
DATE: 22-Aug-2024

COMPANY NAME :  
COMPANY ADDRESS :  
CONTACT PERSON :  
CONTACT NO. :  
COMPANY TIN :

RRCY-2024-08-0932  
**POSTED**  
GEPS REF No.: 1197034  
DATE: Aug. 22, 2024  
SIGNATURE: [Signature]

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 **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

29 Aug 2024 @ 05:00 PM

Very truly yours,

**Rolando V. Cueva**  
Regional Procurement Officer

Terms and Conditions:

- PURPOSE** : CHILDREN'S MONTH CELEBRATION
- PR NUMBER** : **2024-06-0932**
- 1. Award shall be made on per :  Item Basis  Lot Basis
- 2. Quotation validity : 30 CALENDAR DAYS FROM BID OPENING
- 3. Goods shall be delivered on : **November 2024**
- 4. Delivery Area : **RRCY, POLANCO, ZDN**
- 5. Terms of payment : W/ IN 60 CALENDAR DAYS AFTER DELIVERY
- 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

Please email your accomplished request for quotation and annex a at [bacrfq.dswdfo9@gmail.com](mailto:bacrfq.dswdfo9@gmail.com)

(signature over printed name)

Supplier

PHILGEPS NO.: \_\_\_\_\_

PHILGEPS EXPIRY: \_\_\_\_\_

COMPANY NAME :  
 COMPANY ADDRESS :  
 CONTACT PERSON :  
 CONTACT NO. :

ANNEX A: RFQ  
 RFO NO. : 08-0932  
 DATE : 2024-08-22

ITEM NO.	QTY.	UNIT	PURCHASER'S SPECIFICATIONS	TOTAL ABC	BIDDER'S SPECIFICATIONS	UNIT COST	TOTAL COST
1	151	PAX	1 MEAL AND 1 SNACK (DINNER) <b>MENU: FOR TESTIMONIAL DINNER</b>				
2	151	PAX	BEEF AFRITADA / CHICKEN LOLLIPOP / PANCIT GUISADO / BUKO PANDAN				
3	151	PAX	PM SNACK CHICKEN SIOPAO / 12 OZ SOFT DRINKS <b>SNACKS FOR 3 DAYS ACTIVITY</b>				
4	148	PAX	DAY 1 AM SNACK / BEEF BURGER BOTTLED APPLE GREEN TEA 355ML				
5	148	PAX	DAY 2 AM SNACK / BEEF SPAGHETTI BOTTLED APPLE GREEN TEA 355ml				
6	148	PAX	DAY 3 AM SNACK / CHICKEN SIOPAO BOTTLED SOFT DRINK 300 ml <b>INCLUSION:</b>				
			FREE FLOWING WATER				
			PHYSICAL ARRANGEMENT				
			NO PORK MEALS				
			XX				
			INCLUSION				
			FREE FLOWING WATER / NO PORK MEALS				
			PHYSICAL ARRANGEMENTS				
				<b>104,800.00</b>			

PURPOSE : CHILDREN'S MONTH CELEBRATION  
 PR. NO. : 2024-06-0932

CANNASSER

(SIGNATURE OVER PRINTED NAME)  
 SUPPLIER

- DOCUMENTS REQUIRED DURING RFQ OPENING:**
- Mayor's Permit
  - Philgeps Registration Number
  - Income/Business Tax Return for ABC's Above 500k
- DOCUMENTS REQUIRED BEFORE ISSUANCE OF NOTICE OF AWARD:**
- Omnibus Sworn Statement for ABC's Above 500k

