

REQUEST FOR QUOTATION

Section 53.9-Small Value Procurement

RFQ NO. 2025-02-21-71
DATE: 02-20-25

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

Bids and Awards Committee
POSTED
HFB-2025-02-20-0142
GEPS REF No.: 11864072
DATE: 3/10/2025
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 March 14, 2025 @ 9:00 am

Very truly yours,

[Signature]
ROLANDO V. CUEVAS
Regional Procurement Officer

Terms and Conditions:

PURPOSE	:	FOR THE CONDUCT OF WOMEN'S CELEBRATION AT HOME FOR THE ELDERLY.
PR NUMBER	:	_____
1. Award shall be made on per	:	<input type="checkbox"/> Item Basis <input checked="" type="checkbox"/> Lot Basis
2. Quotation validity	:	30 CALENDAR DAYS FROM BID OPENING
3. Goods shall be delivered on	:	MARCH CY 2025
4. Delivery Area	:	LOGOY DIUTAY TALON-TALON 2ND COMPOUND DSWD-HOME FOR THE ELDERLY
5. Terms of payment	:	WITHIN 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

(signature over printed name)

Supplier

PHILGEPS NO.: _____

PHILGEPS EXPIRY: _____





**HOME FOR THE ELDERLY
PROTECTIVE SERVICES DIVISION /
FIELD OFFICE IX**

Section 53.9-Small Value Procurement

ANNEX A: RFQ

RFQ NO. : 2025-02-20-71

DATE : 03-20-25

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

ITEM NO.	QTY.	UNIT	PURCHASER'S SPECIFICATIONS	TOTAL ABC	BIDDER'S SPECIFICATIONS	UNIT COST	TOTAL COST
1	80	pax	Catering Service:One Meal & Two Snacks <i>BUFFER TYPE</i> <i>* 4 HANDS, PLAIN RICE, DESSERT, JUICE (FRUIT)</i> <i>* NO ICE TEA / COFFEE</i>				
TOTAL				P56,000.00			

PURPOSE : FOR THE CONDUCT OF WOMEN'S CELEBRATION AT HOME FOR THE ELDERLY.

PR. NO. :

DOCUMENT/S REQUIRED DURING RFQ OPENING:

1. Mayor's Permit
2. Philgeps Registration Number
3. Income/Business Tax Return for ABC's Above 500k

[Handwritten Signature]

 PROCUREMENT-FOCAL

 SUPPLIER (Signature over Printed Name)

DSWD Field Office IX , General Vicente Alvarez Street, Zamboanga City, Philippines 7000
 Website: <http://www.dswd.gov.ph/fo9@dswd.gov.ph> Tel Nos.:(062) 991-6030/991-6056 Telefax: (062)993-0652

