DRN:

End-User:

PANTAWID PAMILYA PROGRAM

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT FIELD OFFICE V

Regional Government Center, Rawis, Legazpi City, Albay

REQUEST FOR QUOTATION

Company Name: Company Address: Contact No./ Email Address: PhilGEPS Certificate No.:				PR No.: Date:	NF 2409-0699 September 26, 2024 Sec.53.9 Small Value Procurement	
				Mode of		
				Procurement: TIN No.:		
unchecked	ote your lowest d/unticked "COI	government MPLY" boxes	price for the following item(s) specified below. Check/tick the "COMPLY" box if bidder con would be automatically rated as "FAILED".	nplies with the specifi	cations. A quotation	n containing
NO.	QTY.	UNIT	ITEM DESCRIPTION AND SPECIFICATIONS	Kindly tick the box to signify compliance to the specs.	UNIT COST	TOTAL COST
			PROVISION OF LIGHTS AND SOUND SYSTEM DURING THE PAGTIRIPON KAN DSWD BICOL SOCIAL WORKERS ON DECEMBER 4, 2024 IN LEGAZPI CITY			
1	1	lot	LIGHTS AND SOUND SYSTEMS	☐ Comply	P	P
		101	with atleast five(5) functional microphones, wireless	Comply	P	Ρ
			able to cover the whole duration of activity(8:00AM to 5:00PM) lights and sounds shall be assembled atleast 2 hours before the start of the event			
			ABC: Php 60,000.00			
	REMINDERS:					nikki
2. DELIVERY 3. PLACE OF	PERIOD: AS SC	<u>HEDULED/</u> up LEGAZPI CITY	30 calendar days from the date of submission. con receipt of Purchase Order (PO) ((a) as one contract b)separate contracts per lot (c)separate contracts per item			
5. TERM OF I	PAYMENT: CHAR ED DAMAGES: <u>On</u>	GED ACCOUNT e-Tenth Of One	unless specified. Percent (0.001) of the cost of the unperformed portion of the contract for every day of delay. Once the contract for every day of delay. Once the contract for every day of delay.	cumulative amount of liquic	dated damages reaches	ten percent (10%) of the amount
7. Required	documents to subm	nit:	terminate the contract, without prejudice to other courses of action and remedies available under the circumsta /alid Mayor's or Business Permit c. Latest Income Tax Return	ances.		
B. As a condi a. Omnib	tion for <u>AWARD</u> , your sus Sworn Statement	ou will be require	d to submit: Fifty Thousand Pesos(Php50.000.00) and above.			
For any clai Submit you	rrications, you may ur quotation duly si	contact the BAC gned by you or y	© Secretariat at <u>procurement.fo5@dswd.gov.ph</u> or at <u>0910-017-0818.</u> SEP 3 0 2024 our duly authorized representative not later than the deadlipe on	<u> </u>		
	JINKY A. MANGAN		Ana Mae M. Alagabah		and the second of the second o	
AU IV/ 00	ncurrent PROCUR	EMENT Head	Signature over Printed Name of Canvasser	Signature over P	rinted Name of Bidder/A	uthorized Representative

ROSEMARIE A. VIDAL. AO III / Head - CM,U