

## Republic of the Philippines

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office 02

Regional Center, Carig, Tuguegarao City Tel Nos. (078)304-1004 Telefax (078)304-0586

## REQUEST FOR PRICE QUOTATION

23-03-0198

Date:

March 09, 2023

Purpose:

for use of SWAD Batanes

The DSWD Regional Office announces its intention to purchase goods and services and invites into BID for the following:

	ITEM	T		0.1-0-1			
ITEM NO		Quantity	Unit	Unit Price C	uotation Total Price	Remarks	
1	1.5 HP Split Type Aircon	1	unit	Onterfice	Total Frice	PR# 2023-02- 0328	
	Total Approved Budget = P 50,000						
Notes:							
	be sent through fax. Submission must be two (2) days upo	on receipt. Lat	e canvass sh	nall be automatic	ally rejected.		
	otations must be inclusive of tax.						
All interes	ted suppliers are requested to SUBMIT THEIR BIDS on or b	efore	to	the DSWD Region	al Office, Regiona	l Center, Carig,	
	*DSWD E-Mail Address at bacsec.fo2@dswd.go *DSWD Regional Bids and Awards Committee ving suppliers' business documents are required for submis *DTI Business registration *Mayor's Permit *TAX Clearance	ssion to DSWD			ubmission: Others Required	:	
Bids subm	itted not in consonance with the above stated date, time a	and place woul	d be rejecte	ed.	7,		
Quoted by	у:				CELSO L BAC Ch Dire Canvassed By:	ARAO JR Action in the control in the	
	Registered Business Name	-			Can	vasser	
		-				er printed name)	
Printed Na	ame and Signature of Owner/Authorized Representative				, ,	, , , , , , , , , , , , , , , , , , , ,	
Business A	Address :	_					
Date of Su	ubmission :	_					
Contact N	0 :						
Terms of I	Payment :						
TIN Numb							
Philgeps R	legistration no.						
		LEDGMENT RE	CEIPT				
Date:							
This is to a	acknowledge receipt of Request for Price Quotation 23-0: e 02, Regional Center, Carig, Tuguegarao City, Cagayan	3-0198 from th	ne Departm	ent of Social Wel	fare and Develop	ment (DSWD)	
	Company/Supplier/Bidder/Service Provider:						
Cianat	aver Drinted Name of Days						
agnature	over Printed Name of Representative/Owner				Date Received		