



**REQUEST FOR PRICE QUOTATION**  
**23-04-0405**

**Date:** April 20, 2023

**Purpose:** for Crisis Intervention Unit and SWAD Satellite Offices Use

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

ITEM NO	ITEM	Quantity	Unit	Price Quotation		Remarks
				Unit Price	Total Price	
1	Photocopy of PSP intake sheet	153,000	pcs			PR# 2023-04-0703
2	Photocopy of PSP Certificate of Eligibility	91,500	pcs			
3	Photocopy of PSP Payroll	46,500	pcs			
<b>Total Approved Budget = P 436,500.00</b>						

**Notes:**

*\*This can be sent through fax. Submission must be two (2) days upon receipt. Late canvass shall be automatically rejected.*

*\* Price quotations must be inclusive of tax.*

All interested suppliers are requested to **SUBMIT THEIR BIDS** on or before \_\_\_\_\_ to the DSWD Regional Office, Regional Center,

\*DSWD E-Mail Address at bacsec.fo2@dswd.gov.ph

\*DSWD Regional Bids and Awards Committee

The following suppliers' business documents are required for submission to DSWD BAC Secretariat before bid submission:

\*DTI Business registration

\*Mayor's Permit

\*TAX Clearance

Others Required:

Bids submitted not in consonance with the above stated date, time and place would be rejected.

**CELSO L. ARAO, JR.**  
 BAC Chairperson  
 Director III

**Quoted by:**

**Canvassed By:**

Registered Business Name

**Canvasser**

(Signature over printed name)

Printed Name and Signature of Owner/Authorized Representative

**Business Address** : \_\_\_\_\_

**Date of Submission** : \_\_\_\_\_

**Contact No** : \_\_\_\_\_

**Terms of Payment** : \_\_\_\_\_

**TIN Number** : \_\_\_\_\_

Philgeps Registration no.

**ACKNOWLEDGMENT RECEIPT**

**Date:** \_\_\_\_\_

This is to acknowledge receipt of Request for Price Quotation 23-04-0405 from the Department of Social Welfare and Development (DSWD) Field Office 02, Regional Center, Carig, Tuguegarao City, Cagayan

**Name of Company/Supplier/Bidder/Service Provider:** \_\_\_\_\_

**Signature over Printed Name of Representative/Owner** \_\_\_\_\_

**Date Received** \_\_\_\_\_

