

PURCHASE REQUEST

BAC
 DATE: 1/13/2021
 TIME: 9:10
 REC'D. BY: *[Signature]*

Entity Name: DSWD

Fund Cluster: _____

Office/Section: DRMD PR No.: 2021-01-0018 *4* Date: 01/11/2021
 Responsibility Center Code: _____

Stock/ Property No.	Unit	Item Description	Quantity	Unit Cost	Total Cost
	unit	FAMILY KIT: The pack includes the ff: 5 pcs of Bath Towel (atleast 24x46") 2 pcs Ladies Panty (cotton, large, washable, assorted color except white) 2 pcs Men's Brief (cotton, large, washable, assorted color except white) 3 pcs Girl's Panty (cotton, medium, washable, assorted color except white) 3 pcs Boy's Brief (cotton, medium, washable, assorted color except white) 2 pcs Sando Bra (adult, cotton, color white, large, washable) 3 pcs Sando Bra (child, cotton, color white, medium, washable) 4 pcs Tshirt adult (unisex, cotton, assorted color except white, 2 medium, 2 large, washable, round neck) 6 pcs Tshirt children (unisex, cotton, assorted color except white, 3 medium, 3 large, washable, round neck) 4 pcs Shorts (adult, unisex, cotton, assorted color except white, 2 medium, 2 large, washable, garterized) 6 pcs Shorts (children, unisex, cotton, assorted color except white, 3 medium, 3 large, washable, garterized) 2 pair Slipper (adult, rubber slipper, any color, size 9-11) 3 pair Slipper (child, rubber slipper, any color, size 5-8) Packaging: *Printed in Black with DSWD Logo and "Family Kit, For Emergency Purpose, Not For Sale" in 4 sides including the list of items *Supplier to submit prototype kit (1 complete set) *Box size shall be: DSWD specification *Box shall be of good quality Delivery Point: DSWD FO VI Regional Warehouse, Brgy. Mambog, Oton, Iloilo	2,750	310.00	852,500.00

DSWD FIELD OFFICE VI
 BIDS & AWARDS COMMITTEE
 2021-01-0009
 PROC. BY: *[Signature]*

ADAVERONICA B. ESPINO
 PDD III

FINANCE MANAGEMENT DIVISION
FUNDS AVAILABLE
 BUDGET SECTION: *[Signature]*
 DATE: 1/12/2021
 REF.: 3301-01-0018-001 (ANF-C)

Purpose: TOTAL *852,500.00*
 For the purchase of Family Kits for augmentation of affected families during disaster.

Requested by:
 Signature: *[Signature]*
 Printed Name: LUNA S. MOSCOSO
 Designation: SWO V/DRMD CHIEF

Approved by:
[Signature]
MA. EVELYN B. MACAPOBRE, CESO III
 Regional Director