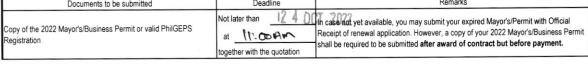


## REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through the Bids and Awards Committee (BAC), intends to procure  Headset with Microphone and noise canceller (Bluetooth)				
procure Headset with Microphone and noise canceller (Bluetooth)  which shall be undertaken in accordance with Section 52.1 (Shopping)				
of the 2016 Revised Implementing Rules and Regulations of Republic Act No. 9184, with an Approved Budget of the				
	ABC) in the amount of <b>44,000</b> .		Forty Four Thousand Pesos	
Contract (	,			
			erein, subject to the Terms and Conditions provided	
below. Submit your quotation duly signed by you or your duly authorized representative not later than				
17	4 OCT 2022 at (1.20p)	through email at	bac-secretariat@psa.gov.ph	
	For any clarification, you may conta	ict us at telephone no.	(02) 8374-8263 or email address at	
gsdprocure	ment.psa@gmail.com			
	AMON 9m'WW/ MINERVA ELOISA P. ESQUIVIAS			
	MINERVA ELÕISA P. ESQUIVIAS			
	Chairperson, Bids and Awards Committee			
TERMS AND CONDITIONS				
1	Bidders shall provide correct and accurate information required in this form.			
2	Price quotattion/s must be valid for a period of thirty (30) calendar days from the date of submission.			
3	Price quotation/s, to be denominated in Philippine peso, shall include all taxes, duties and/or levies payable.			
4	Quotations exceeding the ABC shall be rejected.			
5	Award of contract shall be made to the lowest calculated and responsive bid (LCRB).			
6	Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by you or your duly authorized representative.			
7	In case of two or more bidders are determined to have submitted the LCRB, the PSA shall adopt and employ "draw lots" as the tie- breaking method to finally detrmine the single winning bidder in accordance with GPPB Circular 06-2005.			
8	The item/s shall be delivered according to the requirements specified in the Purchase Request (PR).			
9	The PSA shall have the right to inspect and/or test the goods to confirm their conformity to the Technical Specifications.			
Payment shall be made after delivery and upon submission of the required supporting documents, i.e. Order Slip and/or Billi			equired supporting documents, i.e. Order Slip and/or Billing Statement,	
11	by the supplier. Our Government Servicing Bank, Land Bank of the Philippines, shall credit the amount due to the identified bank of the			
	supplier not earlier than twenty four (24) hours, but not later than forty eight (48) hours, upon receipt of our advice. Please note that			
	the corresponding <b>bank transfer fee</b> , if any, shall be chargeable to the account of the supplier. Liquidated damages equivalent to one tenth (1/10) of one percent (1%) of the value of the goods not delivered within the prescribed period			
	shall be imposed per day of delay. The PSA shall rescind the contract once the cumulative amount of liquidated damages reaches ten			
	percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open to it.			
	Documents to be submitted	Deadline	Remarks	
Copy of the 2022 Mayor's/Business Permit or valid PhilGEPS		Not later than 12 4 00	in case not yet available, you may submit your expired Mayor's/Permit with Official	







PSA Complex, East Avenue, Diliman, Quezon City, Philippines 1101 Telephone: (632) 8938-5267 www.psa.gov.ph

## REQUEST FOR QUOTATION

PR No. 22-09-1605

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s for the item/s as follows: Compliance with Total Technical Amount Unit Specifications (pls. Item(s) and Specification(s), minimum Unit Quantity Price (VAT check) Inclusive) Yes No Headset with Microphone and noise canceller unit 20 (Bluetooth) - Headset for PC - At least 5.1 sorround sound - Lightweight design - fast-cooling ear cushions - Active noise cancellation technology - Charging Port: USB-TypeC - Compatible with Android/Windows/Mac Total amount in words: Printed name of the authorized representative: Signature: Name of Company: Position: Address: Email address: \_\_\_\_\_ Tel. No.: \_\_\_\_\_ Mobile No.: \_\_\_\_ Fax No.: Date: