



REPUBLIC OF THE PHILIPPINES
PHILIPPINE STATISTICS AUTHORITY



REQUEST FOR QUOTATION

The **Philippine Statistics Authority (PSA)** through the Bids and Awards Committee (BAC), intends to procure **Meals for the Strengthening Physical and Personal Safety: Enhancing Security through Emergency Response Protocols and Raising Awareness of Threats via Social Media for 24 to 25 June 2025**

which shall be undertaken in accordance with **Section 53.9 (Small Value Procurement)** of the 2016 Revised Implementing Rules and Regulations of Republic Act No. 9184, with an Approved Budget of the Contract (ABC) in the amount of **Php 52,000.00** *Fifty Thousand Pesos*

Please quote your **best offer** for the **item/s described herein**, subject to the Terms and Conditions provided below. Submit your quotation duly signed by you or your duly authorized representative **not later than**

JUNE 02, 2025 at 11:00 AM through email at bac-secretariat@psa.gov.ph

For any clarification, you may contact us at telephone no. **(02) 8374-8263** or email address at gsdprocurement.psa@gmail.com

Minerva Eloisa P. Esquivias
MINERVA ELOISA P. ESQUIVIAS
Chairperson, Bids and Awards Committee

TERMS AND CONDITIONS

- 1 Bidders shall provide correct and accurate information required in this form.
- 2 Price quotation/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 determine 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.
- 10 Payment shall be made after delivery and upon submission of the required supporting documents, i.e. Order Slip and/or Billing Statement, 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 **bank transfer fee**, if any, shall be chargeable to the account of the supplier.
- 11 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 2025 Mayor's/Business Permit and valid PhilGEPS Registration	not later than <u>6/02/25</u> at <u>11:00 AM</u>	together with the quotation
Notarized Omnibus Sworn Statement (OSS) Supporting document/s to be submitted as may be applicable: a. For Sole Proprietorship: -If owner – Notarized OSS -If authorized representative – Notarized Special Power of Attorney and OSS b. For Corporation: -Notarized Secretary's Certificate and OSS c. Partnership: -Anyone of the partners, Notarized OSS -If authorized representative - Notarized Special Power of Attorney and OSS	Upon acknowledgement of the Notice of Award.	



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

REQUEST FOR QUOTATION
PR No. 25-05-0479

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s for the item/s as follows:

Item(s) and Specification(s), minimum	Unit	Quantity	Unit Price	Total Amount (VAT Inclusive)	Compliance with Technical Specifications (pls. check)	
					Yes	No
Meals for the Strengthening Physical and Personal Safety: Enhancing Security through Emergency Response Protocols and Raising Awareness of Threats via Social Media for 24 to 25 June 2025	lot	1				
Schedule and Venue of Program/Activity						
08:00AM to 5:00PM 24 to 25 June 2025						
- 8th Floor CRS Building, PSA Complex, East Avenue, Diliman, Quezon City						
24 and 25 June 2025						
Snack (AM) - 40 pax x 2 days						
Lunch - 40 pax x 2 days						
Snack (PM) - 40 pax x 2 days						
Specs for Snacks (AM and PM) and Lunch						
-Buffet Style Catering Service: Reusable plates, mugs, and cutlery						
Catering Requirements:						
Snacks (AM and PM) - Bread/Pasta/Kakanin						
Lunch						
- Rice						
- 2 Main Courses (Beef/Chicken/Fish/Seafood)						
- Soup						
- 1 Side Dish (Vegetables)						
- Drinks (Iced Tea/Soda)						
- Dessert						
Other Requirements:						
- Free flowing coffee,candies, and nuts						
- Provision of tables with linen						
- Provision of ice cooler and ice						
- Provision of percolator and coffee essentials (creamer, sugar, tissue, stirrer, etc.)						
- Provision of plates, utensils, and trays						
- Provision of chafing dishes						
- Halal food						
- Provision of water dispenser and round water container (20L)						
- Send menu proposal						
- Send bill arrangement						
Serving Time:						
Free flowing coffee and tea at 07:00AM						
AM Snacks at 09:45AM						
Lunch at 11:45AM						
PM Snacks at 02:45PM						
0						
Note: Food service and packaging shall be in compliance with the Office Memorandum No. 2023-178, entitled Guidelines on the Procurement of Meals and Catering Services for the Philippine Statistics Authority Meeting, Events and Other Activities, Mandating the Use of Ecologically Sustainable Products or Packaging Materials and Prohibition on the Use of Styrofoam and Single-use Plastics						
Total amount in words:						

Printed name of the authorized representative: _____ Signature: _____

Name of Company: _____ Position: _____

Address: _____ Email address: _____

Fax No.: _____ Tel. No.: _____ Mobile No.: _____

Date: _____