

REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through the Bids and Awards Committee (BAC), intends to

procure Office Supplies												
which sl	hall be undertaken in accordance with	h _	Shopping 52.1 (b) (Shopping)									
		-	* Management	o. 9184, with an Approved Budget of the I Seventy Three Thousand Nine Hundred Fifteen								
Contrac	ct (ABC) in the amount of 4	73,915.19		Pesos and 19/100								
	Please quote your best offer for th	e item/s des	scribed herein, sub	oject to the Terms and Conditions provided								
below. Submit your quotation duly signed by you or your duly authorized representative not later than												
07 A	PRIL 2022 at 11:0	MAM	through email at	bac-secretariat@psa.gov.ph and								
bacsecret	tariat.psa@gmail.com.											
	For any clarification, you may conta	act us at tele	phone no. (02) 837	4-8263 or email address at								
gsdprocu	urement.psa@gmail.com											
				amonomina a à								
				MINGMINES MINERVA ELOISA P. ESQUIVIAS								
			Ch	airperson, 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 4	Price quotation/s, to be denominated in Philippine peso, shall include all taxes, duties and/or levies payable. Quotations exceeding the ABC shall be rejected.											
5			complies with the technics	al specifications, and other terms and conditions stated herein.								
	This procurement project is to be awarded by I		Diliplies with the technical	al specifications, and other terms and conditions stated norm.								
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 acc											
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		ind the contract o	nce the cumulative amou	e goods not delivered within the prescribed period shall be nt of liquidated damages reaches ten percent (10%) of the amoun								
	Documents to be submitted		Deadline	Remarks								
Copy of the 20	022 Mayor's/Business Permit and valid PhilGEPS Registration		DI APRIL 2022 II: 00AM	In case not yet available, you may submit your expired Mayor's/Permit with Official Receipt of renewal application. However, a copy of your 2022 Mayor's/Business Permit shall be required to be submitted after award of contract but before payment.								

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

RECEIVED GSD Procurement

Date:

Time:

REQUEST FOR QUOTATION PR No. 22-03-0444

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 (VAT Inclusive) Unit Price Specifications (pls. Item(s) and Specification(s), minimum Unit Quantity check) Yes No alcohol, Ethl (500ml) 68%-72% 4579 bottle Face shield, direct splash protection piece 938 15 Face Mask, KF94, pack of 10s pack alcohol, Isopropyl (500ml) 68%-72% 248 bottle KN95 Face Mask (10 pcs. Per pack) 619 pack Face Mask, 3-ply piece 100900 X-X-X-X-X-X-X-X

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otal amount in words:							
Printed name of the authorize	d representative:		37			Signature:	
Name of Company:					Position:	- 10090)	
Address:					Email addre	ess:	
Fax No.:		Tel. No.:		 _Mobile No.:			
Date:							