

## REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake alternative mode of procurement, small value procurement for office supplies

Name of Project	Microsoft MS Office Licenses
Solicitation	17-09-212-CRASD
Location	Legazpi City
Brief Description	
Quantity	16
Approved Budget for the	
Contract (ABC)	P192,000.00
<b>Contract Duration</b>	

Please quote your **lowest price** on the item/s listed below and submit personally your **SEALED QUOTATION not later than 10:00 am on September 22**, **2017** at the **Administrative Division**, **2**<sup>nd</sup> **FIr. Albay Capitol Annex Bldg. 1, Legazpi City** 

SGD ANABELLA D. BARQUILLA RBAC Chairman

## **Terms and Conditions:**

- 1. Supplier must bev within Legazpi City area.
- 2. Only the suppliers registered at the Philippine Government Electronic Procurement System (PhilGEPS) shall be allowed to submit the quotation.
- 3. All entries must be typewritten/printed legibly in the Bid Form. Failure to use this form will result to disqualification of your bid.
- 4. Late submission of quotation shall not be accepted.
- 5. Bids exceeding the ABC shall be disqualified.
- 6. The Lowest bidder shall be informed immediately and shall be asked to submit additional requirements within three days after the opening of bids or during post qualification.
- 7. Award of contract shall be made to the lowest quotation, and complies with the specifications and other terms and conditions as stated in the RFQ.
- 8. Terms of Payment shall be made through check payable to the supplier.
- 9. The PSA reserves the right to reject any or all bid proposals, or declares the bidding a failure, or not to award the contract, and makes no assurance that a contract shall be entered into as a result of this invitation.

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# **BID FORM**

Item/s and specification/s (minimum)	Unit	Qty.	Unit Price	Total Amount (VAT inclusive)	Compliance with Technical Specifications (please check) YES NO	
MS Office Home and Business 2016     xxx	Pc	16			( )	( )
For official use of PSA-RSSO V, Legazpi City.					( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
Other Requirements:						

After having carefully read and accepted your Terms noted above.	and Conditions. I/We quote you on the item at prices
Printed Name of authorized representative/Signature_	
Position:	
Name of Company	
Address:	Email Address:
Fax No Tel No.:	Cellphone No
Date:	
LBP ACCOUNT NUMBER OF ESTABLISHMENT:	