



REPUBLIC OF THE PHILIPPINES
PHILIPPINE STATISTICS AUTHORITY

REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake alternative mode of procurement (**shopping, small value, etc.**) for **Catering Service**. Details of the procurement are as follows:

Name of Project	Conduct of Workshop for the preparation of User's manual for the Integrated Wholesale Price Surveys
Solicitation	ESSS-19-02-007
Location	Metro Manila
Brief Description	Procurement of Goods
Quantity	See attached Bid form.
Approved Budget for the Contract (ABC)	₱ 30,000.00
Date of Delivery	

Please quote your lowest price on the item/s listed on the next page and submit the sealed quotation not later than 11:00 am on February 15, 2019 personally at the **General Services Division, 11th Flr., Cyberpod One Eton Centris, Diliman, Quezon City**. Address your quotation to GSD-PSS.

DAISY S. ADLAWAN
Officer-In-Charge
General Services Division

Terms and Conditions:

1. Only the suppliers registered at the Philippine Government Electronic Procurement System (PhilGEPS) shall be allowed to submit the quotation.
2. All entries must be typewritten/printed legibly in the Bid Form. Failure to use this form will result to disqualification of your bid.
3. Late submission of quotation shall not be accepted.
4. Bids exceeding the ABC shall be disqualified.
5. 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.
6. 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.
7. Terms of Payment shall be made through check payable to the supplier.
8. 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.

Fax no.: 374-82-83/ 374-82-62

[illegible]

Printed Name of authorized representative/Signature_____

Position: _____

Name of Company _____

Address: _____ Email Address: _____

Fax No. _____. Tel No.: _____ Cellphone No. _____

Date: _____